



BOROUGH
OF
PONTFRACT

ANNUAL REPORT

of the
Medical Officer of Health

and the
Chief Public Health Inspector

FOR THE YEAR

1971

B O R O U G H O F P O N T E F R A C T

ANNUAL HEALTH REPORT OF THE MEDICAL OFFICER
OF HEALTH FOR THE YEAR 1971

By

J. F. FRASER

M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

BOROUGH OF PONTEFRAC

Public Health Committee

as at 31st December, 1971

Chairman: Alderman B. Wood
Deputy Chairman: Alderman G.E. Poppleton

Cr. I.R. Bloomer
Alderman R. Cunningham
Cr. J. Dixon
Alderman R. Egan
Cr. S.A.A. Gardiner
Cr. K. Millett
Cr. D. Robinson
Cr. A. Rodgers
Cr. J.S. Schofield
Cr. H. Smith

Town Clerk

L.A. Tawn, Esq., D.P.A., Solicitor

Medical Officer of Health

John F. Fraser, M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

Chief Public Health Inspector

S.C.L. Wilson, Esq., M.A.P.H.I., M.R.S.H., M.I.H.E.

Medical Officer's Section,
Health Department,
Baghill House,
Walkergate,
Ponterfract.

To:- The Mayor, Aldermen and Councillors
of the Borough of Pontefract

Ladies and Gentlemen,

I have the honour to present, for your information and consideration, my 24th Report on the Health and Health Services of the Borough during the year 1971.

The Annual Report of the Chief Public Health Inspector, dealing with the Sanitary Circumstances of the Borough, Housing and the Inspection and Supervision of Food Supplies, is complementary to this Report.

For your information, certain details of the personal health services administered by the County Council are included.

I am,

Your Obedient Servant,

Jan 7. 7 rows.

Medical Officer of Health

PART 1

Statistics and Social Conditions of the area

Area of District in Acres	...	...	...	...	4,865 Acres
Population, mid-year, Registrar General's estimate					31,120
Number of Inhabited houses at the end of 1971	...				10,100
Rateable Value	...	...	...	...	£957,746
Product of Penny Rate	...	...	...	...	£8,915

Summary of Vital Statistics of the Borough for 1971 in comparison with 1970

						1971	1970
Population	...	...	...	...	...	31,120	31,140
No. of Live Births	...	...	...	...	...	565	555
No. of Still Births	...	...	...	...	...	7	9
No. of Infant Deaths under 1 year of age	...	...	...	...	...	10	10
No. of Deaths (All ages)	...	...	...	...	...	284	307
Comparability Factors (see footnote)							
Births	...	...	...	...	...	.91	.91
Deaths	...	...	...	...	...	1.21	1.21
Crude Birth Rate	...	...	...	...	...	18.2	17.8
Adjusted Birth Rate	...	...	...	...	...	16.6	16.2
Crude Death Rate	...	...	...	...	...	9.1	9.9
Adjusted Death Rate	...	...	...	...	...	11.0	12.0
Infant Mortality Rate	...	...	...	...	...	18.0	18.0
Perinatal Mortality Rate	...	...	...	...	...	24.0	26.6
Neonatal Mortality Rate	...	...	...	...	...	12.0	12.6
Maternal Mortality Rate	...	...	...	...	...

The comparability Factors for births and deaths are supplied by the Registrar General and when the crude rates are multiplied by these factors, the resulting rate is that which would apply if Pontefract had the same age and sex constitution as the Country as a whole.

Vital Statistics for the Year 1971

<u>Live Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	278	244	522
Illegitimate	21	22	43
	299	266	565

Crude Birth Rate per 1,000 population: 18.2

<u>Deaths (All ages)</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
	141	143	284

Crude Death Rate per 1,000 population: 9.1

<u>Stillbirths</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	2	4	6
Illegitimate	-	1	1
	2	5	7

Stillbirth Rate per 1,000 Live and Still Births: 12.00

<u>Infant Mortality</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	6	4	10
Illegitimate	-	-	-
	6	4	10

Infant Mortality Rates

Total Infant Deaths per 1,000 Live Births:	18.00
Legitimate Infant Deaths per 1,000 Legitimate Live Births:	19.00
Illegitimate Infant Deaths per 1,000 Illegitimate Live Births:	Nil

Neonatal Mortality

No. of deaths of Infants under four weeks:	7
Mortality Rate per 1,000 Live Births:	12

Perinatal Mortality

No. of deaths under 1 week:	7
Mortality rate per 1,000 total Live and Still Births:	24

Maternal Mortality

There were no Maternal Deaths during the year.

Causes of Death (All ages)

The principal causes of death are set out in the following Table:-

Cause of Death	Male	Female	Total
Tuberculosis of Respiratory System	1	-	1
Late Effects of Respiratory T.B.	-	1	1
Malignant Neoplasm, Buccal Cavity etc.	1	2	3
Malignant Neoplasm, Oesophagus	-	1	1
Malignant Neoplasm, Stomach	5	2	7
Malignant Neoplasm, Intestine	3	7	10
Malignant Neoplasm, Larynx	-	1	1
Malignant Neoplasm, Lung, Bronchus	14	2	16
Malignant Neoplasm, Breast	-	3	3
Malignant Neoplasm, Uterus	-	1	1
Malignant Neoplasm, Prostate	4	-	4
Leukemia	-	1	1
Other Malignant Neoplasms	6	9	15
Benign and Unspecified Neoplasms	1	1	2
Diabetes Mellitus	-	5	5
Avitaminoses, etc.	1	-	1
Other Endocrine etc. Diseases	1	2	3
Anaemias	-	1	1
Multiple Sclerosis	-	1	1
Other Diseases of Nervous System	1	2	3
Chronic Rheumatic Heart Disease	-	4	4
Hypertensive Disease	1	1	2
Ischaemic Heart Disease	41	27	68
Other forms of Heart Disease	6	3	9
Cerebrovascular Disease	13	26	39
Other Diseases of Circulatory System	3	3	6
Pneumonia	7	19	26
Bronchitis and Emphysema	11	7	18
Asthma	1	-	1
Other Diseases of Respiratory System	2	1	3
Peptic Ulcer	2	1	3
Intestinal Obstruction and Hernia	1	-	1
Cirrhosis of Liver	-	1	1
Other Diseases of Digestive System	1	-	1
Nephritis and Nephrosis	1	-	1
Other Diseases, Genito-urinary system	2	-	2
Diseases of Musculo-Skeletal System	-	1	1
Continued overleaf			

Cause of Death	Male	Female	Total
Brought forward	130	136	266
Congenital Abnormalities	2	1	3
Birth Injury, Difficult Labour, etc.	2	3	5
Other causes of Perinatal Mortality	1	-	1
Motor Vehicle Accidents	3	2	5
All Other Accidents	2	1	3
Suicide and Self-inflicted Injuries	1	-	1
Total ALL CAUSES	141	143	284

Vital Statistics of the Borough over the Ten Years 1962 - 71

Year	Population	Birth Rate	Death Rate	Infant Mortality Rate	Stillbirth Rate	Maternal Mortality
1962	27,960	19.2	9.8	13.0	18.3	Nil
1963	27,970	21.6	10.7	18.2	14.7	Nil
1964	28,320	22.2	10.7	27.1	21.8	Nil
1965	28,330	20.2	9.6	17.2	16.9	Nil
1966	29,260	20.4	11.2	23.4	14.8	Nil
1967	29,630	20.1	9.9	22.0	20.0	Nil
1968	30,200	18.1	10.5	12.8	18.0	Nil
1969	30,820	18.0	9.9	23.0	21.0	Nil
1970	31,140	17.8	9.9	18.0	16.0	Nil
1971	31,120	18.2	9.1	18.0	12.0	Nil

Comparison of Pontefract Vital Statistics with other West Riding areas, the West Riding Administrative County and England and Wales, 1971

	Pontefract Borough	Aggregate West Riding Urban Districts	West Riding Administrative County	England and Wales
Crude Birth Rate	18.2	16.9	17.0	16.0
Adjusted Birth Rate	16.5	17.2	17.2	-
Crude Death Rate	9.1	12.0	11.4	11.6
Adjusted Death Rate	11.0	12.5	12.3	-
Tuberculosis, Respiratory	0.03	0.02	0.02	0.02
Tuberculosis, Other Forms	0.03	0.01	0.01	0.01
Tuberculosis, All Forms	0.06	0.03	0.02	0.03
Cancer of Lung and Bronchus	0.51	0.54	0.52	0.63
Cancer, All Forms	1.99	2.25	2.16	2.39
Vascular Lesions of Nervous System	1.25	1.86	1.75	+
Heart and Circulatory Diseases	2.86	4.62	4.41	+
Respiratory Diseases	1.54	1.53	1.42	+
Maternal Mortality Rate	-	0.09	0.10	0.17
Perinatal Mortality Rate	24.5	21.8	21.7	22.3
Neo-natal Mortality Rate	12.4	10.7	11.0	11.6
Infant Mortality Rate	17.7	18.7	18.4	17.5
Stillbirth Rate	12.2	12.8	12.3	12.5

Prevalence of and control over Infectious and
Other Diseases

The following tables show the prevalence of Infectious Disease, other than Tuberculosis, during the year 1971.

Disease	Jan - March	April - June	July - Sept	Oct - Dec	Total	Number admitted to Hospital
Whooping Cough	28	5	-	-	33	-
Chickenpox	52	45	20	2	119	-
Suspected Food Poi- soning	6	11	10	7	34	2
Infective Hepatitis	2	14	4	7	27	-
Measles	3	17	5	-	25	3
Scarlet Fever	2	3	1	4	10	-
Dysentery	-	-	21	4	25	8
Totals	93	95	61	24	273	13

Table showing corrected notifications of Infectious Diseases 1962 - 71

Year	Measles	Whooping Cough	Suspected Food Poisoning	Scarlet Fever	Dysentery	Total
1962	320	3	-	6	6	335
1963	293	5	1	5	12	316
1964	397	37	-	5	1	440
1965	222	9	1	10	22	264
1966	690	-	5	12	27	734
1967	85	84	10	5	2	186
1968	86	5	4	3	9	107
1969	22	7	11	6	38	84
1970	643	64	46	7	6	766
1971	25	33	34	10	25	127

Tuberculosis

The number of new cases and the number of deaths occurring in 1971 are down in the following table:

Age Group	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0 - 5	1	3	-	-	-	-	-	-
6 - 14	1	-	-	-	-	-	-	-
15- 24	-	-	-	-	-	-	-	-
25- 44	4	-	-	1	-	1	-	-
45- 64	1	-	-	-	-	-	-	-
65 and over	-	-	-	-	-	-	-	-
Totals	7	3	-	1	-	1	-	-

The following table gives the position regarding Tuberculosis in Pontefract Borough in 1971.

Summary of Register

	Respiratory	Non-Respiratory	Total
Number of cases on Register 1st January	142	38	180
New cases notified during year	10	1	11
Restored to Register	-	-	-
Transferred from other areas	-	-	-
Total	152	39	191
Number of cases removed from register during the year	11	-	11
Number of cases left on register at end of the year	141	39	180

National Assistance Acts, 1948-51

Section 47 of the National Assistance Act, 1948, was designed to help persons, who, suffering from grave chronic disease, or being aged or physically handicapped, being in insanitary conditions, are unable to devote to themselves and are not receiving from others proper care and attention. Under the original Act, applications were submitted to a Magistrate's Court for the removal of such persons, but the Amendment Act of 1951 introduced an accelerated procedure whereby application can be made to a Justice of the Peace.

No action was taken in Pontefract during the year.

Medical Examination of Corporation Staff

During the year the following medical examinations were made:-

1. Entry to the Sickness Pay Scheme	13
2. Entry to the Superannuation Scheme	27
3. Special	4
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TOTAL	44
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COUNTY COUNCIL OF THE WEST RIDING OF YORKSHIRE

HEALTH DIVISION NO. 11

Castleford	M.B.
Pontefract	M.B.
Featherstone	U.D.
Knottingley	U.D.
Normanton	U.D.
Osgoldcross	R.D.

Annual Report of the
DIVISIONAL MEDICAL OFFICER

1971

By

J. F. FRASER

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Divisional Health Office,
Baghill House,
Walkergate,
Pontefract.
WF8 1QW

Certain important changes have taken place in the Division during the year under review.

In April, the new Department of Social Services became operational, and our Home Help and Mental Health Services were transferred to that Department. To help the new department to 'settle in' we undertook to continue these services in our office on an agency basis until the end of June.

An important change in our Nursing Service was the adoption of the management structure recommended in the Mayston Report. Four new Senior Nursing Officer posts were created, and these were all filled by members of the Nursing Staff in the Division. A number of other members of our Nursing Staff were successful in obtaining similar posts in other Divisions, and for a time we had a considerable shortage of nurses. These gaps are gradually being filled.

Next year promises to be one of great activity as during it the preparative machinery for the re-organisation of the Health Service will come into operation. Committees and Working Parties will be set up and a great effort will be called for on the part of all staff involved in administration. It should be a year of great interest for all of us.


Divisional Medical Officer

Section 1Vital StatisticsPopulation (Registrar General's Estimate)

Castleford	M.B.	38,140
Pontefract	M.B.	31,120
Featherstone	U.D.	15,270
Knottingley	U.D.	16,510
Normanton	U.D.	17,630
Osgoldcross	R.D.	9,110

Total Division 11	127,780
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Births

Total number of live births registered in the Divisional area	2,283
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Crude Birth Rates

Division No. 11	17.9
West Riding Administrative County	17.0
England and Wales	16.0

Deaths

Total number of deaths registered in the Divisional area	1,308
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Crude Death Rates

Division No. 11	10.2
West Riding Administrative County	11.4
England and Wales	11.6

Infant Mortality

Total number of deaths of infants under 1 year	44
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Infant Mortality Rates

Division No. 11	19.3
West Riding Administrative County	18.4
England and Wales	17.5

Maternal Mortality

Total number of maternal deaths	1
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Maternal Mortality Rates

Division No. 11	0.43
West Riding Administrative County	0.10
England and Wales	0.17

Section 2Care of Mothers and Young ChildrenHealth Centres and Clinics

The following table gives details of the attendance of children at Health Centres and Clinics in the Divisional area during 1971.

Name and Address of Centre	No. of children who attended during the year and who were born in			Total No. of children who attended during the year	No. of attendances during the year made by children who were born in			Total attendances during the year
	1971	1970	1966-1969		1971	1970	1966-1969	
C.W.C. Trinity Street, Pontefract	435	393	199	1027	3160	2252	603	6015
C.W.C. Albert Street, Featherstone	216	159	69	444	1693	985	260	2938
Methodist Chapel, Streethouse	34	42	35	111	368	379	92	839
Health Centre, Knottingley	227	270	221	718	2405	2149	566	5120
Methodist Chapel, Ferrybridge	66	59	73	198	701	470	168	1339
Mobile Clinic	84	103	86	273	672	778	285	1735
C.W.C. Crewe Road, Airedale	289	186	81	556	2485	2154	531	5170
Health Centre, Welbeck Street, Castleford Opened June, 1971	185	9	15	209	2172	775	173	3120
St. Paul's Church, Glasshoughton. Closed May, 1971	31	62	27	120	173	582	103	858
C.W.C. Sagar Street, Castleford Closed May, 1971	101	211	96	408	524	1516	273	2313
The Mini Clinic, Lock Lane, Altofts	60	81	32	173	696	728	169	1593
C.W.C. Church Lane, Normanton	179	117	18	314	1666	1000	85	2751
TOTALS	1907	1692	952	4551	16715	13768	3308	33791

The Health Centre at Welbeck Street, Castleford was completed in April, 1971. The Local Health Authority services were transferred there in June. One group practice of General Practitioners started their surgeries there in Mid-June, the second practice in late June, and the third practice in August. This enabled the use of the Health Centre to proceed smoothly. There has been excellent co-operation between everyone concerned.

By the end of the year work on the construction of the Health Centre at Victoria Street, Featherstone, was nearing completion.

Mothercraft and Relaxation Clinics

Relaxation classes for expectant mothers were held at various clinics in the Divisional area. The following table gives details of attendances during the year.

Name and Address of Centre	Number of women who attended during the year			Total number of attendances made during the year		
	Institutionally booked	Domiliary booked	Total	Institutionally booked	Domiliary booked	Total
Central Clinic, Trinity Street, Pontefract	91	6	97	425	26	451
Albert Street Clinic, Featherstone	46	20	66	249	122	377
Health Centre, Knottingley	46	2	48	205	22	227
Child Welfare Centre, Church Lane, Normanton	49	6	55	269	46	315
Child Welfare Centre, Sagar Street, Castleford. Closed May, 1971	24	2	26	120	9	129
The Health Centre, Welbeck Street, Castleford. Opened June, 1971	38	1	39	188	2	190
TOTAL	294	37	331	1456	227	1683

Care of the Premature Baby

During the year 145 babies weighing 5½lbs. or less were born in Hospitals or Maternity Homes to mothers resident in the Division. Six were born at home.

Section 3Health Visiting

The following table gives details of visits carried out by Health Visitors during the year.

Cases visited by Health Visitors		No. of cases (i.e. first visits)
1	Total number of cases	18294
2	Children born in 1971	2340
3	Children born in 1970	2776
4	Children born in 1966 - 69	6059
5	Total number of children in lines 2 - 4	11175
6	Persons aged 65 or over (excluding 'domestic help only' visits)	3254
7	Number included in line 6 who were visited at the special request of a General Practitioner or hospital	1435
8	Mentally disordered persons	106
9	Number included in line 8 who were visited at the special request of a General Practitioner or hospital	46
10	Persons, excluding maternity cases, discharged from hospital (other than mental hospitals)	317
11	Number included in line 10 who were visited at the special request of a General Practitioner or hospital	195
12	Number of tuberculous households visited (i.e. visits by health visitors not employed solely on tuberculosis work)	177
13	Number of households visited on account of other infectious diseases	330
14	Other cases	3451
15	Number of tuberculous households visited by tuberculosis visitors (i.e. employed <u>solely</u> on tuberculosis work)	571

Diabetic Liaison

The arrangement whereby a Health Visitor attends at the Diabetic clinics held at the Castleford Hightown Hospital and Pontefract General Infirmary continued. She is able to discuss with the Hospital staff every aspect of care required by the patients who attend. Arrangements are made for the patients to be visited subsequently either by a Health Visitor or District Nursing Sister.

Geriatric Liaison

Two Health Visitors attend a case conference each week at Headlands Hospital, Pontefract, where the progress of the patient, his social needs, are discussed, so that arrangements can be made for the provision of any service from my Department to be available when the patient returns home.

The Health Visitors make follow-up visits after the patient returns home.

Section 4

Home Nursing Service

All the District Nurses working in the Divisional area are attached to individual medical practices or groups of practices rather than working on an area basis. This system has worked extremely well and the closer co-operation between the doctors and nurses has been more satisfactory both to them and to the patients.

A large number of different items of equipment for loan to patients being nursed at home is available in the Division. These include wheelchairs, walking aids, bed pans, rubber sheets, commodes, beds, mattresses, foam rings, hydraulic hoists, etc. During the year 1,541 issues of such equipment were made.

The tendency to use disposable materials has continued and nowadays disposable catheters, urine bottles and sputum mugs are being used. The issue of disposable paper sheets to incontinent patients has increased considerably. These are a great help to the relatives who would otherwise be faced with large amounts of unpleasant daily washing.

Work undertaken during the year by District Nurses other than in the patients' own homes

(a)	Number of cases treated	5264
(b)	Total number of treatments given	14470
(c)	Average total time spent including consultations at General Practitioners surgeries	25 hours per week

During the year the following work was undertaken by District Nursing Sisters.

Classification	Number of cases attended by District Nurses during the year	Number of visits paid by District Nurses during the year
(1) Medical	2,787	53,925
(2) Surgical	1,088	15,161
(3) Infectious Diseases	74	99
(4) Tuberculosis	8	350
(5) Maternal Complications	119	961
(6) Other	36	387
Totals	4,112	70,883
Patients included above who were aged 65 or over at the time of the first visit during the year	1,989	47,040
Children included above who were under 5 years of age at the time of the first visit during the year	251	998
Patients included above who have had more than 24 visits during the year	641	47,441

Day and Night Nursing Service

A limited service is provided in cases where an emergency arises during the terminal stages of illness to help relatives who have been faced with prolonged periods caring for patients. This enables them to get a few nights sleep without interruption. The staff employed can either be trained nurses or "sitters-in", depending on the needs of the patient.

• Section 5

Midwifery

The proportion of home confinements was about 17% of the total births.

Early discharges from hospitals and maternity homes and the investigation of home circumstances of mothers booked for 48 hour discharge continue to impose a considerable amount of visiting on the midwives. They also attend the Mothercraft and Relaxation classes held at Health Centres and Clinics in the Division.

The following figures relate to the Divisional Area.

Domiciliary Midwifery

(a) No. of home confinements	405
(b) No. of patients receiving trilene alone	77
(c) No. of patients receiving pethidine alone	82
(d) No. of patients receiving trilene and pethidine	141

Early discharges from hospitals and maternity homes

(i) Discharged at 48 hours	262
(ii) Discharged at 2 - 5 days	455
(iii) Discharged at 5 - 10 days	758
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Total	<u>1,475</u>

Institutional Midwifery

Patients from this Divisional area are admitted to either the Castleford Maternity Home or Southmoor Maternity Unit, Hemsworth. The booking of these patients is carried out by my Department on an agency basis for the Pontefract, Castleford and Goole Hospital Management Committee.

During the year accommodation was provided for all patients having their first baby and for all those with home conditions unsuitable for a home confinement. Of the remaining applicants a high proportion were allotted beds.

Section 6

Chiropody

The County Council's scheme provides free chiropody for the following:-

1. Elderly persons (Males 65 years or over
Females 60 years or over)
2. Expectant Mothers
3. Physically handicapped patients

Patients are usually treated by the chiropodists at County Council Clinics, but when unable to do so on medical grounds, treatment is given at home.

The following table gives details of work undertaken during the year.

Total No. of Clinic Sessions	1086
Total No. of Patients treated at Clinics	2342
Total No. of Attendances at Clinics	9160
Total No. of Patients treated at home	925
Total No. of treatments given at home	3718

Section 7

Health Education

During 1971 the domiciliary nursing team, Health Visitors, Midwives, and District Nursing Sisters, continued to give individual advice on all aspects of health to their families and patients.

Health education on more formal lines was organised in clinics, schools and mothers clubs.

Mothercraft and Relaxation Classes

These have been extended from 8 - 10 weeks courses to include additional information about Family Planning and the emotional needs of parents and infants. Both Midwives and Health Visitors worked together. Several times during the year a film was shown in the evenings to expectant fathers and this proved to be very successful.

Health Centres and Clinics

Exhibitions

Displays and leaflets together with exhibitions highlighted certain areas of health education, such as accident hazards in the home and outside, water safety, smoking, family planning and immunisation.

Health Education in Schools

Formal teaching in schools during 1971 increased and covered personal hygiene, dentition and menstruation. In senior schools the special subjects such as drugs, smoking and child care were included.

Mothers Clubs

These continued to give a service to young mothers. The activities included social activities and health teaching. These clubs fulfilled some of the needs of mothers with young children. Guest speakers attended and films were used on other occasions.

Members of the staff gave talks on various subjects to evening groups as requested.

Section 8

Screening Tests

Cervical Cytology

This service provides for the examination of women, who, although physically well, may suffer from a pre-cancerous condition known as Carcinoma-in-Situ. All that is involved is a simple and painless examination and the taking of a cervical smear.

There has been a steady flow of applications.

During the year 524 smears were taken and 2 patients were found to have positive smears.

Well Woman Clinic

A special clinic session is held at the Castleford Health Centre every Tuesday afternoon at which married ladies are invited by appointment to be examined by one of our Medical Officers. The following tests and examinations are carried out.

- Cervical Smear test
- Urine examination
- Blood pressure
- Blood test (Haemoglobin)
- Vision
- Hearing
- Weight
- Height

During the year 27 clinics were held and 239 patients examined. It was necessary to refer 22 patients to their General Practitioners for various conditions.

The results of all the tests are sent to the patient's General Practitioner as a routine.

Ortolani Testing for Congenital Dislocation of the Hip

This test is carried out by midwives, health visitors and clinic doctors on babies coming into their hands for the first time. During the year 6 children were referred to specialists and confirmed as cases of congenital dislocation of hip and splinted. Twenty-six other children were referred to specialists but found not to have dislocation of hip or given appointments for further investigation.

Phenylketonuria

Phenylketonuria is an inherited metabolic disease which causes brain damage and mental deterioration, but if diagnosed early there is the possibility of preventing irreversible mental deterioration if special dietary control is taken. Every child has a simple blood test performed at about six days old. This is done either in the maternity home or by the domiciliary midwife.

The tests on all babies in this area during the year proved negative.

Assessment of the Health of Young Children

For the past year or so all children have had their hearing tested, subject to the agreement of the parents, at certain specified ages, 8 months, 18 months and 3 years of age. In July, 1971, a further scheme was introduced to monitor the health of pre-school children in an effort to isolate defects, take remedial action and keep children with defects under observation.

All children are now seen by Health Visitors, again subject to parental consent, at the ages of 3 months, 6 months, 10 months, 18 months, 3 years and 4 years of age, to verify that normal development is progressing. Children thought not to be making normal progress are examined by one of the Authority's Medical Officers specially trained in this work. Appropriate action can then be taken. In those cases where a child may suffer from a handicap which will eventually require special education provision, advance warning can be given to the Education Authority on the need for accommodation.

In the six months that the scheme was in operation, during the year the following work was undertaken:-

1. No. of children assessed by Health Visitors	1521
2. No. of children referred to Local Health Authority doctor	80
3. No. of children examined by Local Health Authority doctor	34

Section 9

Vaccination and Immunisation

Community immunisation in this country is at present directed to the prevention of Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, Smallpox, Tuberculosis, Measles and German Measles.

A revised schedule of vaccination and immunisation procedures was adopted during the year. This is as follows:-

<u>Age</u>	<u>Procedures</u>
Six months	Diph/Tet/Pert. and oral polio vaccine. (First dose)
Eight months	Diph/Tet/Pert. and oral polio vaccine. (Second dose)
Fourteen months	Diph/Tet/Pert. and oral polio vaccine. (Third dose)
Sixteen months	Measles vaccination.
Five years	Diph/Tet. and oral polio vaccine or Diph/Tet/Polio vaccine.
Eleven to twelve years	B.C.G. Vaccine.
Fifteen years	Polio vaccine (oral or inactivated) Tetanus Toxoid

Children born on or after 1st April, 1968, have been dealt with under this schedule. All the appointments and follow-up procedures are dealt with by the County Council computer at Wakefield.

Immunisation against German Measles (Rubella) commenced in October, 1970, and this was to be available to all girls between their eleventh and fourteenth birthday. Due to the shortage of vaccine, priority in the first instance was given to those girls in their fourteenth year. As supplies are more freely available all girls between 11 and 14 years of age are being offered vaccination.

The immunity which it gives lasts a considerable time, and through the usual child bearing life. That is the important fact, for although Rubella is usually a mild disease in childhood and adolescence it can cause miscarriages or handicaps in the baby if the disease occurs in the early months of pregnancy. Some of these handicaps (including blindness, deafness and heart disease) are very serious indeed.

The following table shows the number of children in the Divisional area immunised against the various diseases during the year.

	Year of Birth						
	1971	1970	1969	1968	1967-1964	Others aged under 16	Totals
Diphtheria							
Primary	40	1,308	441	25	16	9	1,839
Reinforcing	-	21	22	10	399	106	558
Whooping Cough							
Primary	40	1,283	440	22	4	2	1,791
Reinforcing	-	19	21	6	62	9	117
Tetanus							
Primary	40	1,308	441	25	16	13	1,843
Reinforcing	-	21	22	12	412	151	618
Polioomyelitis							
Primary	40	1,313	443	26	20	8	1,850
Reinforcing	-	22	24	11	379	89	525
Measles							
Primary	-	730	578	89	62	4	1,463
Rubella							
Primary	-	-	-	-	-	76	76

B.C.G. Vaccination of School Children in Accordance with
the Provisions of Ministry of Health Circular 19/64

1. No. of medical officers (including Divisional Medical Officer) approved to undertake B.C.G. Vaccination 5

2. Acceptances

(a) No. of children offered tuberculin testing and vaccination if necessary, whether the offer was made during the year or previously 3,013

(b) No. of (a) found to have been vaccinated previously 44

(c) No. of acceptances 2,372

(d) Percentage of acceptances, i.e. (c) to (a) - (b) 79.89%

3. Pre-vaccination Tuberculin Test

(a) No. of children 2(c) tested 2,252

(b) Result of test:	<u>Heaf Test</u>	<u>Mantoux Test</u>		
(i) Positive	<u>135</u>	<u>-</u>		
(ii) Negative	<u>1,971</u>	<u>-</u>		
(iii) Not ascertained	<u>146</u>	<u>-</u>	TOTAL	<u>2,252</u>

(c) Percentage positive, i.e. (b) (i) to (b) (i) + (ii) ...	<u>6.41%</u>	<u>-</u>	TOTAL	<u>6.41%</u>
---	--------------	----------	-------	--------------

4. Vaccination

No. vaccinated:-

(a) Following negative Heaf Test 1,866

(b) Following negative Mantoux Test -

TOTAL 1,866

1,866

School Health Service

The basis of the School Health Service has traditionally been founded on the routine medical inspection of all pupils at certain stages of their school life. Changing social patterns and the ready availability of medical attention through the National Health Service have induced many authorities to concentrate the efforts of school doctors more on the ascertainment and follow-up of children with special handicaps or about whom nurses, teachers, or parents are concerned.

In September, 1968, it was decided to retain as routine examinations only the first (entrants) and the last (leavers) for all children. In the intervening years the parents are asked to complete a Health Questionnaire and only those children thought to require examination are dealt with. The following tables show the number of examinations carried out and the defects found.

Classification of the Physical Condition of Children
examined at periodic medical inspections

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical	PHYSICAL CONDITION OF PUPILS INSPECTED		No. of pupils found not to warrant a medical exam- ination	Pupils found to require treatment(excluding dental diseases and infestation with vermin)		
		Satis- factory	Unsatis- factory		for defective vision (excluding squint)	other con- dition recorded at Part II	Total indi- vidual pupils
		Number	Number				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1967 and later	116	116	-	-	2	35	36
1966	435	434	1	-	7	117	123
1965	302	302	-	-	2	87	88
1964	25	25	-	-	-	8	8
1963	3	3	-	-	-	1	1
1962	1	1	-	-	-	-	-
1961	-	-	-	-	-	-	-
1960	-	-	-	-	-	-	-
1959	-	-	-	-	-	-	-
1958	-	-	-	-	-	-	-
1957	317	316	1	-	9	118	122
1956 and earlier	621	620	1	-	37	228	254
TOTAL	1,820	1,817	3	-	57	594	632

Col. (3) total as a
percentage of Col. (2) 99.84%

Col. (4) total as a
percentage of Col. (2) 0.17%

Defects found by periodic and special Medical
Examinations during the Year

Defect Code Number	Defect or Disease		Periodic Inspections				Special Inspection
			Entrants	Leavers	Others	Total	
4	Skin	T O	53 19	139 30	- -	192 49	12 6
5	Eyes - a. Vision	T O	8 27	46 152	- -	54 179	- 9
	b. Squint	T O	16 34	3 31	- -	19 65	5 7
	c. Other	T O	7 2	1 3	- -	8 5	- 2
6	Ears - a. Hearing	T O	51 13	46 3	- -	97 16	24 7
	b. Otitis Media	T O	7 40	3 27	- -	10 67	1 13
	c. Other	T O	2 3	21 8	- -	23 11	3 -
7	Nose and Throat	T O	58 108	24 18	- -	82 126	9 29
8	Speech	T O	6 36	1 9	- -	7 45	5 12
9	Lymphatic Glands	T O	10 47	- -	- -	10 47	- 8
10	Heart	T O	1 18	1 19	- -	2 37	3 16
11	Lungs	T O	31 28	8 24	- -	39 52	11 3
12	Developmental	T	3	-	-	3	1
	a. Hernia	O	6	-	-	6	1
	b. Other	T	22	76	-	98	13
		O	27	31	-	58	21
13	Orthopaedic	T	-	2	-	2	-
	a. Posture	O	-	9	-	9	1
	b. Feet	T	25	22	-	47	8
		O	8	28	-	36	7
	c. Other	T	6	5	-	11	1
		O	18	22	-	40	7

Defect Code Number	Defect or Disease		Periodic Inspections				Special Inspection
			Entrants	Leavers	Others	Total	
14	Nervous System						
	a. Epilepsy	T	4	5	-	9	1
		O	2	3	-	5	-
	b. Other	T	7	6	-	13	19
		O	70	17	-	87	29
15	Psychological						
	a. Development	T	6	-	-	6	6
		O	20	8	-	28	4
	b. Stability	T	3	4	-	7	1
		O	56	29	-	85	17
16	Abdomen	T	2	5	-	7	-
		O	2	3	-	5	1
17	Other	T	8	11	-	19	4
		O	6	11	-	17	4
18	TOTALS	T	336	429	-	765	127
		O	590	485	-	1075	204

T = Requiring Treatment

O = For observation only

Cleanliness Inspections

Routine and request inspections were carried out at each school by the school nurses and a total of 45,819 inspections and re-inspections were carried out. Four hundred and sixty-eight individual children were reported to be unsatisfactory but it should be pointed out that in the majority of cases the degree of infestation is extremely light.

The remedial procedure adopted on the discovery of these defects is to notify the parents informally in the first instance, visiting if necessary to give advice on the methods of dealing with infestation. If cure is not effected the nurse visits the home and interviews the parents, and finally, if it is evident that insufficient care is being exercised, the Statutory Notice under the Education Act, 1944, is sent requiring the child to be cleansed to the satisfaction of the Medical Officer or to the person appointed by him for that purpose within 48 hours.

Consultant Orthopaedic Clinics

An Orthopaedic Clinic is held each month at the Central Clinic, Trinity Street, Pontefract. During the year we suffered a great loss in the death of Mr. R. W. Calderwood who had conducted this clinic for many years. As a consequence only 3 sessions were held and 16 children attended. The appointment of a successor is awaited.

Consultant Ear, Nose and Throat Clinics

A special clinic is held at the Central Clinic, Trinity Street, Pontefract, by Mr. K. M. Mayall, each fortnight. Details of these clinics are as follows:-

1. Number of sessions held during the year - 50

	<u>Pre-School Children</u>	<u>School Children</u>
2. Number of individual children seen by consultant including those continuing attendance from previous year	3	106
3. Number of (2) above referred for operative treatment	2	51
4. Number of children:		
(a) who obtained operative treatment during the year	2	50
(b) treated at school clinics	-	23
5. Total number of attendances at consultant clinic	7	280

Consultant Paediatric Clinics

Dr. J. D. Pickup holds a clinic at the Health Centre, Welbeck Street, Castleford, as and when required.

Details of the clinics held are as follows:-

1. Number of sessions held during year - 3

	<u>Pre-school Children</u>	<u>School Children</u>
2. Number of individual patients seen:		
(a) new cases	-	-
(b) cases attending from previous year(s)	-	17
3. Total number of attendances at clinics	-	21

Ophthalmic Clinics

These are held at the Health Centre, Welbeck Street, Castleford, and Central Clinic, Trinity Street, Pontefract.

Total number of attendances 1,720

Number of pupils for whom glasses prescribed 502

Child Guidance Clinic

A Child Guidance Clinic is held every Wednesday at the Central Clinic, Trinity Street, Pontefract. Dr. K. N. Maxwell, Psychiatrist, is in charge of the clinic and has the assistance of Mr. P. W. Atkinson, Psychologist, and Mrs. P. Harris, Social Worker in Psychiatry. The following table gives details of work undertaken during the year:-

Number of sessions held during year - 101

	<u>Boys</u>	<u>Girls</u>	<u>Total</u>
Number of new cases during year	53	33	86
Total number of cases discharged or admitted for residential treatment	50	29	79
Number of cases carried forward	39	19	58

Speech Therapy

Special clinics are held in the Division at the Health Centre, Castleford, Child Welfare Clinic, Normanton, Central Clinic, Pontefract, Health Centre, Knottingley, and at the Castle Day Special School for Educationally Subnormal Children.

I give below details of the work undertaken:-

1.	Number of half-day sessions held during the year	...	...	...	187		
2.	(a) Number of children seen for the first time during the year	..			59		
	(b) Number of children attending for treatment from previous years				97		
	Total number of children treated $\sqrt{2(a) + 2(b)}$ to agree with Form 8M (iii)F7	...	...	...	...	...	156
3.	Number of children awaiting treatment at end of year	...	...		81		
	(a) Interviewed and placed on waiting list	...	...	...	36		
	(b) Not seen	...	...	...	45		
4.	Children Discharged during the year:					<u>Boys</u>	<u>Girls</u>
	Total	...	...	...	...	11	23
	Analysis	..	...	...	...	-	-
	Speech normal	...	...	...	...	10	1
	Speech improved	.	...	...	...	10	7
	Unsuitable for treatment	...	...	...	...	-	-
	Non co-operation	...	...	...	...	6	2
	Admitted to special schools	.	...	...	...	2	2
	Left school	...	...	...	...	-	1
	Left district	.	...	...	...	3	2
	Other reasons (private treatment)	..	...	...	...	-	-
5.	Number of visits made to schools	..	...	...	...	4	
6.	Number of home visits	.	...	...	...	4	
	<u>Analysis of Children Treated</u>					<u>Boys</u>	<u>Girls</u>
1.	Stammerers (Dysrhythmia)	...	...	...	...	23	5
2.	Defects of Articulation due to:						
	(a) Cleft palate	...	...	...	...	5	3
	(b) Cerebral palsy	...	...	...	...	1	4
	(c) Other structural malformations	...	...	...	...	3	3
	(d) Other causes, e.g. neurological	...	...	...	...	2	-
	(e) No specific cause found	...	...	...	...	35	19
3.	Disorders of Language due to:						
	(a) Retarded language development(non-specific)	...			...	7	1
	(b) Retardation with associated subnormality	...	...		...	21	10
	(c) Retardation associated with deafness	...	...		...	6	2
	(d) Dysphasia	...	...	...	...	-	-
	(e) Aphasia	...	...	...	...	-	-
	(f) Other reasons	...	...	...	...	-	-
4.	Dysphonia	...	...	...	...	2	-
5.	Other defects	...	...	...	...	4	-

Examination of Handicapped Children

The regular medical examination of handicapped children continued during the year and where necessary recommendations were made to the Education Authority for the placement of children in special schools.

Section 11

Miscellaneous Services

Mass Radiography

The Mobile Unit of the Leeds Regional Hospital Board visits the area each year. The policy of the Board is to concentrate their efforts on examining work people in industries where there is a greater risk in contracting chest diseases rather than holding sessions for members of the general public.

During the year the following figures relate to this area:-

Total number of persons x-rayed	4,659
Number of active cases of Tuberculosis found	3
Number of inactive cases of Tuberculosis found	4
Number of non-Tuberculous abnormalities	22

Family Planning

The County Council allows free use of clinic premises and equipment to the Family Planning Association and in addition pays for the cost of medical advice to all patients and for the cost of appliances for patients referred on medical grounds only.

In this area the Association holds weekly sessions at the Castleford Hightown Hospital, Central Clinic, Pontefract, and at the Knottingley Health Centre. Sessions are also held at the Normanton Child Welfare Clinic three times each month.

Battered Babies

Early in 1970, Ministry Circular C.M.O. 2/70 drew attention to the problem of young children who are injured by their parents. It was felt that local discussion should take place amongst all agencies concerned with child care so that a definite course of action should be planned for dealing with this problem.

A committee was therefore established in the Divisional area involving the Consultant Paediatrician, Consultant Orthopaedic Surgeon, Divisional Medical Officers, Children's Officer, N.S.P.C.C., Nursing Officers and Police. The need for early recognition of the problem was discussed and a policy formulated for dealing with any case or suspected case of the syndrome. Following the original meeting subsequent committee meetings have been called to deal with individual cases. These have proved most helpful and excellent liaison has been established between the Hospital Service, the Local Authority Services and the N.S.P.C.C.

Medical Examination of Staff

During the year the following medical examinations were carried out on behalf of the County Council:-

Entrants to Teacher Training Colleges	203
Entrants to Teaching Profession	14
School Meals Service	60
Superannuation	61

Section 12

General Provisions of the Health Services

A. HOSPITALS

Facilities for patients from this area are provided at the following hospitals.

1. General Hospital Accommodation

Castleford Hightown Hospital
Pontefract General Infirmary
Ackton Hospital, Featherstone

2. Maternity Homes

Castleford Maternity Home
Southmoor Maternity Unit, Hemsworth

3. Chronic Sick

Headlands Hospital, Pontefract
Southmoor Hospital, Hemsworth

4. Mental Hospitals

Stanley Royd Hospital, Wakefield

5. Isolation Hospitals

Burntwood Hospital, Brierley
Seacroft Hospital, Leeds

B. AMBULANCE SERVICE

The West Riding County Council provide the ambulance service and there is a depot situated in Beancroft Street, Castleford, Telephone Castleford 2281.

C. LABORATORY FACILITIES

The Public Health Laboratory at Wood Street, Wakefield, (under the administration of the Medical Research Council of the Department of Health and Social Services) accepts bacteriological, biological, entomological and chemical investigations from General Practitioners and the Public Health Department.

Divisional Staff at 31st December, 1971

Divisional Medical Officer

J. F. Fraser, M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

Senior Departmental Medical Officer and School Medical Officer

Castleford - Vacancy

Pontefract - Vacancy

Medical Officers for Maternity and Child Welfare and School Medical Services

Full-time

Vacancies

Part-time

M. M. Brearley, M.B., Ch.B

I. Butler, M.R.C.S., L.R.C.P.

D. J. Haist, M.B., Ch.B., D.P.H.

M. Mason Jones, M.B., B.S., D.P.M.

J. L. Mabbott, M.B., B.S.

V. Pearson, M.B., Ch.B., D.C.H., D.R.C.O.G.

F. J. Penrose, M.B., Ch.B.

S. F. Schofield, M.B., Ch.B., D.C.H., D.P.H.

M. M. Scholefield, M.R.C.S., L.R.C.P.

A. Vaux, M.B., B.S.

Leeds Regional Hospital Board - Visiting Staff

Paediatrician

J. D. Pickup, M.D., Ch.B., D.C.H.

Ophthalmologists

K. K. Prasher, M.B., B.S., D.O.

Vacancy

Orthopaedic Surgeon

Vacancy

Oto-Rhino Laryngologist

K. M. Mayall, M.A., M.B., B.Chir., F.R.F.P.S.G., L.R.C.P., D.L.O.

Child Guidance Clinic

Psychiatrist - Dr. K. N. Maxwell

Psychologists- P. W. Atkinson

D. Clark

Social Worker - Mrs. P. Harris

Divisional Nursing Officer

Mrs. M. Craig

Nursing Officers

Health Visiting

Mrs. M. D. Fisher

Mrs. S. A. Izon

Home Nursing

Mrs. M. Berwick

Midwifery

Mrs. P. Green

Health Visitors and School Nurses

Mrs. J. Allsopp

Mrs. M. E. Bedford

Mrs. P. M. Brice

Miss L. O. I. Day

Mrs. S. N. Dinsdale

Miss A. Elsley

Mrs. M. Faulkner

Mrs. V. M. Newby

Miss M. Reading

Miss I. J. Robinson

Mrs. M. P. Sawyer

Mrs. M. B. Toplis

Mrs. E. M. Vipurse

Mrs. M. A. Ward

Mrs. L. Whiteley

Assistant Health Visitors

Mrs. M. Clarkson

Mrs. M. E. Davie

Mrs. A. Ellis

Mrs. L. Hudson

Mrs. E. Johnson

Mrs. B. M. Milward

Mrs. J. Steels

Midwives

Mrs. C. Atkinson
Mrs. K. Berry
Miss M. Brazoy
Mrs. K. Clarkson
Mrs. E. Glover (relief)
Mrs. J. R. Pearson
Mrs. A. M. Randall
Mrs. M. Richardson
Mrs. D. Tomlinson
Mrs. A. Watson
Mrs. S. Whitehead
Mrs. M. Wylie

Home Nurses

Full-time

Miss M. Andrew
Mrs. M. Bennison
Mrs. C. P. Bowler
Mrs. M. Burrows
Mrs. J. E. Busson
Mrs. S. Calvert
Mrs. S. G. Cousins
Mrs. S. Eaton
Mrs. K.M. Engelhart
Mrs. M. L. Etherington
Mrs. K. Frain
Mrs. M. Golding
Mrs. F. Green
Mrs. P. Howes
Mrs. M. A. E. Jewitt
Mrs. V. McVeigh
Mrs. S. Megson
Mrs. A. Pearce
Mrs. J. M. Pycock
Mrs. H. Rowbottom
Mrs. P. Tinker
Mrs. D. Vause
Mrs. M. Yates

Part-time

Mrs. P. M. Long
Mrs. M. R. Moore

Speech Therapists

Mrs. N. Hepworth (part-time)
Mrs. S. C. Holmes (part-time)

Administrative and Clerical Staff

Divisional Administrative Officer - W. Carver
Deputy Divisional Administrative Officer - C. R. Pickering
Senior Clerk - W. R. Wood
Mrs. A. Ball
Mrs. A. K. Booth
Mrs. D. Camp (part-time)
Mrs. M. H. Carver (part-time)
Miss N. Cawthra
Mrs. B. Chapman
Mrs. I. A. D. Cooper
Mr. T. Crook
Mrs. C. Hardy
Mrs. G. Hutchinson
Miss J. Littlewood
Mr. B. Morley
Mrs. L. Murgatroyd (part-time)
Mrs. R. Plows
Mrs. P. Ramsdale (part-time)
Mrs. J. Sampson
Mrs. C. E. Smith
Mrs. S. A. Smith (part-time)
Mrs. M. Tate
Miss J. M. Wallace
Mrs. B. Whittingham (part-time)
Mrs. F. Wilson (part-time)

APPENDIX

FACTORIES ACT, 1961

Prescribed particulars required by Section 153(1)

1. Inspections made:

	No. on Register	Inspec- tions	No. of written notices	Occupiers prosecuted
(a) Factories in which sections 1, 2, 3, 4 and 6 are to be enforced by L.A.	2	2	-	-
(b) Factories not included in (a) in which section 7 is enforced by L.A.	88	72	20	-
(c) Other Premises in which section 7 is enforced by L.A. (excluding out-workers premises)	4	4	-	-
Totals	94	78	20	-

2. Cases in which Defects were found:

	No. of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	
Sanitary conveniences (sec. 7)					
Insufficient	1	-	-	-	-
Unsuitable or defective	35	28	1	1	-
Other defects	7	4	-	-	-
Totals	43	32	1	1	-

3. Outworkers:

Nature of Work	No. of out- workers in August list required by Sec. 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Making wearing apparel	-	-	-	-	-	-
All other work	-	-	-	-	-	-
Totals	-	-	-	-	-	-

J.F. Fraser,
Medical Officer of Health

November, 1972.

B O R O U G H O F P O N T E F R A C T

A N N U A L E N V I R O N M E N T A L

H E A L T H R E P O R T

of the

C H I E F P U B L I C H E A L T H I N S P E C T O R

for the

Year ended Thirty-first December, 1971

S.C.L. WILSON,

M.A.P.H.I., M.R.S.H., M.I.H.E.
Chief Public Health Inspector.

Municipal Offices,
Pontefract.

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Annual Report of the Chief Public Health Inspector

Gentlemen,

I present for your consideration the Annual Report on work carried out by the Department's inspectorate and ancillary staff during 1971. As in previous years the statistical content of the Report is accompanied by narrative intended not only to stimulate the further interest of members but to explain the deeper objectives that lie behind figures. The Report is essentially in four parts each allocated roughly the same amount of Departmental time; Housing, Pollution Control, Food Control and Environmental Hygiene.

Last year I referred to the volume of work being the prime cause of a delayed Annual Report on the workings of the Department. There has been no change in this situation during the current year; rather there has been the intensification of work as local government reform begins to take shape.

Although the degree of specialisation practised within the Department has meant that much of the extra work load could be absorbed, the recommendations arising out of the recent Organisation and Methods Study confirmed the need for additional staff to cope with meat inspection duties and the extensive House Improvement Programme.

Inevitably a good deal of the Departmental time devoted to housing matters has centered upon the Housing Acts 1969-1971. Collectively these Acts were the motivating force behind the nation wide efforts to secure an effective improvement programme. Prior to 1969 progress had been relatively slow but with the advent of a maximum grant raised to £2,000 of which 75% could be grant attracting the whole policy received a major stimulus.

Other restrictions were removed more particularly those relating to the payment back of grant when dwellings were sold within a stated period following improvement. It is this aspect which has led some authorities to call for a re-examination of the situation and to question the wisdom of such freedom of action. The reaction is not unreasonable having regard to the speculators who have taken advantage of the situation more particularly in the large cities and towns. So far there has been no serious intervention by this category of applicant within the Borough. On the contrary the very few applicants who have improved houses for subsequent sale have in all probability improved houses which otherwise would have remained un-improved and so far no evidence exists to suggest abuse of the grant policy.

Whilst housing matters have received considerable attention a less spectacular yet no less important phase of development has been taking place in matters relating to food control. An expanding programme of health education for workers engaged in food trades has widened its concepts to provide for evening study courses during the winter months. It is encouraging to see foodworkers attending these courses not only from the larger firms, but increasingly from the 'corner' shops.

Although I am convinced of long term benefits that accrue from this aspect of the work, the concept of imparting knowledge and . experience through educational processes must remain as a complementary service to the duty of the inspecting officer to advise, warn and in the last resort institute legal proceedings.

In concluding this introduction I would acknowledge the co-operation and encouragement extended to me personally both by my fellow officers and the Chairman and Members of the Health Committee.

I would only add that I am fully appreciative of having a loyal and hardworking staff whose efforts have helped to sustain the Department's activities during a year which was not without difficulty and to which impending re-organisation brings a new dimension.

I am, Gentlemen,

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'S. L. Wilson', followed by a period.

Chief Public Health Inspector.

Section One

HOUSING CONDITIONS

House Provision - Slum Clearance - Fitness
of Dwellings - Houses in Multi-Occupation -
Improvement Grants - Common Lodging Houses

House Provision

Since post-war house building began 26 years ago, some 6,203 dwellings have been erected in the Borough - 95 of these during the year under review - as detailed in Table 1. Dwellings have been allocated to miners displaced during 1971 from areas subject to pit closures and accords to an agreed policy between the Corporation and National Coal Board.

In 1945 the total number of dwellings in the Borough was 5,557 of which 1,348 were owned by the Corporation. The Table depicts building progress since the war.

Table 1. New Housing 1946 - 1971

No. of dwellings erected*					
Year	By the Corporation		By Housing Association	By Private Enterprise	Total
	Permanent	Temporary			
1946	6	25		23	54
1947	159			39	198
1948	161			26	187
1949	134			11	145
1950	104			12	116
1951	86			9	95
1952	105			11	116
1953	108		178	19	305
1954	73		536	41	650
1955	35			47	82
1956	26			65	91
1957	88			76	164
1958	6			140	146
1959	68			164	232
1960	107			192	299
1961	91			185	276
1962	108			134	242
1963	63			182	245
1964	34			180	214
1965	85			209	294
1966	156			134	290
1967	33			122	155
1968	390			151	541
1969	676			120	796
1970	93			82	175
1971	7			88	95
Total	3,002	25	714	2,462	6,203

*Excluding 38 temporary dwellings, subsequently demolished.

At the end of 1971 the number of applicants for Corporation dwellings living in the Borough was 569, many of whom, when due for investigation by the Housing Department, may well have found other accommodation.

Of these 569 applicants, 105 were persons living in lodgings at the time of application, and 176 elderly persons seeking accommodation more suited to their needs; this latter group therefore forms a comparatively high proportion of all applicants. Only 24 of the elderly were living in lodgings, and the provision of a sufficient number of new units specific to the needs of the elderly would release much under-occupied accommodation and contribute substantially to satisfy the general housing needs. Some 267 bungalows and 32 purpose built flats already provided for elderly persons, supplemented by 121 bedsitter flats - mainly let to elderly persons, are clearly inadequate and further units were recently completed or are nearing completion at the Eastbourne and Ladybalk areas.

Table 2 depicts progress since the war - a period covering a quarter of a century. It is of course unfortunate that statistics do not in any way portray the quality of dwellings erected in more recent years.

Table 2. Provision of Housing Accommodation for Elderly Persons

In the year	No. of 'elderly person' units in the Borough	As % of all Corporation housing
1945	18	1.3
1950	32	1.7
1960	85	3.2
1963	217	7.5
1965	273	8.8
1966	357	11.2
1968	368	9.7
1969	383	10.1
1970	415	9.5
1971	422	9.3

Houses in Multiple Occupation

The problems arising primarily from multi-occupation occur mainly in the larger towns, and the associated squalid conditions which resulted in the passing of successive Housing Acts are not to be found in the Borough. The bulk of the one-time high class residential property which in old age, lends itself to multiple occupation, has largely disappeared as the result of slum clearance and commercial development. Pontefract has no problem in this respect at the present time.

Slum Clearance

During 1964 a survey of older properties in the Borough was completed and a programme for the clearance of sub-standard houses was recommended to and accepted by the Council. The programme extends over a period of ten years in two 5-year phases and is due for completion not later than 1975. At the outset some 592 dwellings were scheduled in potential clearance categories.

The half way stage was reached by 1970, and the target set for the first five years had been considerably exceeded. If progress continues apace the clearance programme should be completed by the end of 1973.

In the year under review the most significant factor continued to be the impact on older housing brought about by the Housing Act 1969 and the increased grant provisions afforded by the Housing Act 1971. The 1969 Act brought about a change of attitude towards life expectancy of dwellings. The improvement grant sections of the Act provides the incentive and drive to re-habilitate dwellings before deterioration renders them unfit; thus providing a major compensatory factor in preventing premature clearance.

The 1969 Act also provides for substantial increases in the slum clearance compensation payable to many of those owner occupiers, who have occupied their homes for more than two years at the time of representation. In these cases the compensation is based on the market value of the property. Furthermore, tenanted houses subject to slum clearance action can claim an enhanced 'well maintained payment', provided a genuine and reasonable attempt has been made to keep the house in a satisfactory state of repair despite its general unfitness.

Reference to Table 3(a) and (b) shows that during 1971 action was initiated in respect of 15 unfit dwellings. This brings the total number of dwellinghouses represented since the commencement of the programme to a total of 352.

In addition certain dwellings scheduled for future clearance were purchased in advance of formal action in order to expedite anticipated re-development particularly in the Tanshelf area.

The year 1971 witnessed confirmation of a Compulsory Purchase Order in respect of 54 unfit dwellings following declaration of the Pontefract (Tanshelf No.7) Compulsory Purchase Order.

Table 3. Slum Clearance

(a) Individual Unfit Houses

	1971
Number of Houses represented	2
Number of Closing Orders	2
Number of Undertakings accepted	-
Number of Closing Orders revoked	1
Number of Demolition Orders made	-

Number of houses vacated -	
(a) By Council rehousing	3
(b) Otherwise	1
Totals	4
Number of Families displaced	3
Number of Persons displaced	7
Number of houses closed and not subsequently demolished	1
Number of houses demolished	-
Totals	1

(b) Clearance Areas

	1971
Number of Areas represented	1
Number of houses involved	13
Number of houses vacated -	
(a) By Council rehousing	38
(b) Otherwise	12
Totals	50
Number of families displaced	38
Number of persons displaced	91
Number of houses demolished	16

1. The first settlement in Boston was made in 1630 by a group of Puritan settlers from England. They were led by John Winthrop, who gave the famous "City upon a Hill" speech. The settlers established a colony that would become the city of Boston.

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Fitness of Dwellings

During the year 1,568 houses were inspected as a routine measure and as a result 173 were repaired or improved as the result of action taken by the Department. Particulars of housing activities are summarised below.

1. Inspection of houses -

(1) Total number of houses inspected for housing defects (under Public Health or Housing Acts)	1,568
(2) Number of inspections made in this connection (initial inspections, re-visits, work in progress, etc.)	2,982
(3) Number of houses (included in (1)) above inspected and recorded under the Housing Consolidated Regulations	55
(4) Houses needing further action:	
(a) Number considered unfit for human habitation	13
(b) Number (excluding those in (a) above) considered to be not in all respects reasonably fit	103

2. Remedy of defective conditions -

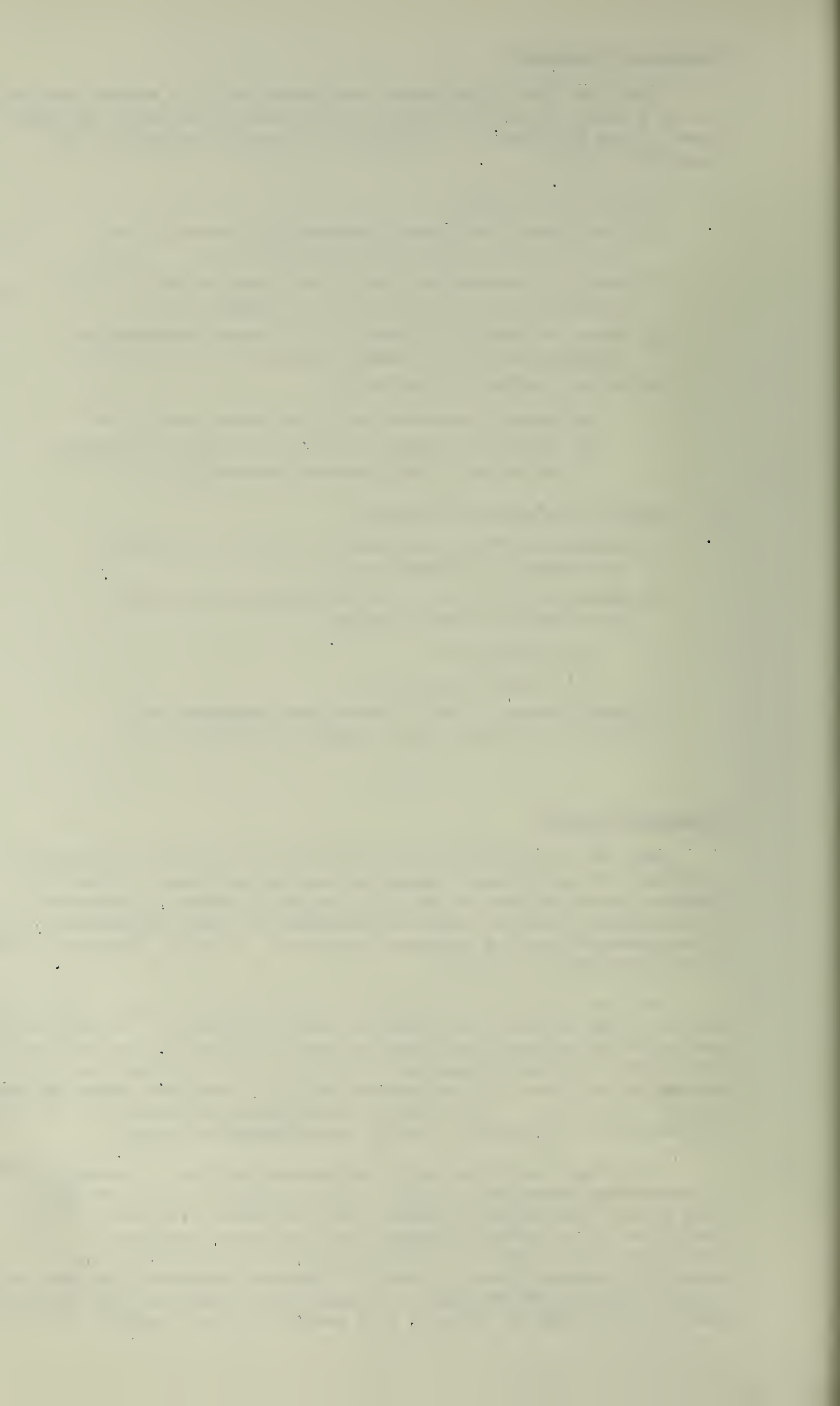
(1) Houses made fit, or in which defects were remedied, as a result of informal action	41
(2) Houses made fit, or in which defects were remedied as a result of formal action:	
(a) Housing Act	1
(b) Public Health Act	10
(3) Other houses in which defects were remedied as a result of formal action under Public Health Act	121

Improvement Grants

Under the heading Slum Clearance I have referred to the Housing Acts 1969 and 1971 and probable impact on housing problems. These Acts provide a major advance in the field of environmental improvement. The more generous financial terms for carrying out house improvements have already brought about a substantial increase in public interest, coupled with applications for grant.

The mere passing of an Act does not necessarily imply a wide recognition of its content from those who stand to benefit. A local campaign was mounted to coincide with the coverage in national press and on T.V. The Council have two designated 'Improvement Officers' and two technical assistants who have a direct responsibility in ensuring widest implementation of the Act. The results of these officers' enthusiasm are being realised in a considerable flow of applications for grant.

It has been the Department's policy and concern to co-ordinate slum clearance and improvement action. By these means it is anticipated that by the time all unfit houses have been dealt with there will be no dwellings in the Borough lacking in the 'standard amenities'. There is no practical reason why this should not be achieved and special attention is being given to owners of tenanted properties to take advantage of the current 75% grant. Representing a cost of only twenty-five pence in the pound to an owner this must be the best bargain offer ever.



Standard Grant

In suitable cases the Standard Grant can be claimed as a right. The prime intention is to encourage owners to modernise houses having a useful life of fifteen years and to which, without major structural alterations, there can be added those 'standard amenities' not already provided. The 'standard amenities' comprise hot water supply, a fixed bath, a wash hand basin, a sink and an inside water-closet.

Improvement Grant

The Improvement Grant is available for more extensive improvements and is intended to apply to property with a normal life expectation of thirty years. A grant is paid solely at the discretion of the local authority and in addition to the 'standard amenities' may provide for the improvement of lighting, ventilation, heating and cooking facilities, and for works necessary to eliminate inherent structural defects such as dampness due to the lack of an effective damp proof course. In essence this type of grant provides for a complete re-habilitation scheme. It offers an excellent opportunity for structural resuscitation.

The more generous provisions and greater discretion allowed to the local authority by the Housing Act 1969, is beginning to pay dividends in the form of a substantial increase in this type of application. Most certainly it is a trend that is being encouraged to the fullest.

Table 4. Improvement Grant Statistics

Type	Applications			Grants actually made	
	Made	Approved	Refused	No.	£
Standard	18	18	-	12	2,625
Improvement	42	39	3	29	9,595

Since grants were first made available in 1949, 268 houses have been improved with the aid of grants from the Council up to the end of 1970 only. The figures for 1971 indicate that the impact of the 75% grant has given the impetus that was badly needed. The tally over the preceding twenty years had been poor.

A more harsh note has however been introduced in recent times by sharply rising costs which if unchecked must inevitably lead to some diminution of activity. In a more practical vein some applicants are finding difficulty in securing bona-fide contractors, due to full order books. Delays are being experienced not only for this cause but also through shortage of materials and lengthy delivery dates.

In June 1974 the increased grant benefit is due to return to the 50% figure. One seriously wonders to what extent the manufacturers are prepared to expand and tool up to meet a short term expedient. I believe that most of us would be circumspect at undertaking a major expansion programme to meet a short term option. I would have much preferred a ten year planned programme aimed at securing higher standards

in all older dwellings. One cannot achieve this desirable end by mid-1974 but we shall have available for the re-organised authority - plans, specifications and complete surveys which require minimum administration before implementation.

Improvements - Local Authority Housing

With the advent of the Housing Act 1969 I reported in considerable detail on its content and likely effect. The Council subsequently agreed in principle to the Chief Public Health Inspector implementing the Act in the private housing sector, and requested that the pre-war Corporation houses be similarly considered for improvement.

Last year I expressed a hope that it would be possible to achieve a phased programme of improvements to our older estates. The Council is fully alive to the possibility and accordingly plans and surveys being undertaken are likely to see these hopes turned into reality. More particularly the improvement of old persons' bungalows at Micklegate, Westbourne and Beechwood Estates have either been completed or are nearing completion. Similarly dwellings at the Monkhill and Kingsmead Estates are undergoing improvement and it is the intention to improve dwellings at Eastbourne and Ladybalk Estates in the forthcoming year. A sum total of 517 dwellings.

General Improvement Areas

In pursuance of promoting a better environment the Council have declared the Monkhill and Micklegate Estates to be General Improvement Areas - a total of 236 dwellings. The Micklegate scheme is complete and the Monkhill scheme will commence very shortly.

A third area comprising 132 dwellings at the Eastbourne Estate is about to be declared, and when completed will complement the admirable quality of new housing currently being erected by the Council immediately adjacent to these older dwellings.

Four walls and a roof do not ensure a satisfactory home. The drab and dismal surroundings that are the legacy of the industrial revolution and 'byelaw building' led inevitably to environmental poverty - albeit counterbalanced by a peculiarly English community spirit. Slum clearance action over the years has removed much of this sub-standard type of housing.

It is evident that not only must new housing policies lay stress on creative aspects of renewal and re-development but with the advent of the Housing Act 1969 local authorities must seize the opportunity to arrest environmental decay and re-furbish areas with character and dignity. Such opportunity should logically extend to the control of pollution and noise through the environmental concepts of smoke and noise control areas.

Common Lodging Houses

The Minister asks for information about common lodging houses. There are no such premises in the Borough, the last being demolished over a decade ago.

ATMOSPHERIC POLLUTION

General Conditions - Industrial Pollution
 - Smoke Control Areas - Suspension of Smoke
 Control Orders - Atmospheric Pollution Records

General Conditions

Pontefract is officially included in the West Riding Black Area. This indicates a disturbing level of atmospheric pollution, and calls for concerted action by all classes of fuel users to minimise pollution, irrespective of source. Whilst the Council have always acknowledge the desirability of achieving clean air, with only 20% of the Borough subject to smoke control much remains to be done before we have a clean air town. Environmental pollution has become a national topic, and despite public apathy on some aspects there is a crying need for local authorities to give a lead. The control of smoke, noise, effluvia and effluents should be exercised conjointly to secure maximum benefit and not at the expense or neglect of one particular aspect of environmental health. The long term benefits of pollution control are of inestimable value in terms of improved community health.

Industrial Pollution

Industrial plant in the Borough should no longer present a major problem. There are some twenty industrial and commercial chimneys, and with one or two exceptions call for no special attention. During the year approval was given to the installation of three new furnaces and like approval to chimney heights.

During 1971, 27 observations were made and the information collected was particularly useful in forming a basis for representations to those premises requiring to improve upon standards of combustion.

Recent clean air legislation has been added to the statute book providing for greater control over chimney heights, grit and dust emissions, and installation of boiler plant in many different kinds of premises. This more extensive control now exercisable by the local authority should greatly help to prevent excessive pollution in the years ahead.

Smoke Control Areas

There are eight operative smoke control areas in the Borough. The following Table gives particulars of acreage involved and the number of buildings therein at completion of housing developments for 1970/1971.

Table 5. Smoke Control Area Progress

No. of opera- tive Orders	Number of premises			% of houses in the Borough controlled	Area in Acres	% of acreage in the Borough
	Dwelling houses	Industrial Commercial etc.	Total			
8	2,265	137	2,402	20	981	20

The first smoke control order became operative in 1959 and the last orders in 1966. There have been innumerable set-backs to the original programme of which the most decisive was the short fall in solid smokeless fuel supplies in winter months of 1970 and 1971. A further extension of the programme to include the Mill Hill Lane to Ackworth Road area recommended for operation in 1972 was deferred by the Council as inopportune and consideration was delayed for twelve months.

In common with other local authorities in the West Riding where the basic industry is closely connected with coal mining, actions have been tempered by local social and economic factors involved in introducing a programme of smoke control. In this context problems relating to 'concessionary coal' and the encouragement of continued use of solid smokeless fuels attains a high degree of priority. Although extension of smoke control areas has suffered its set-backs the Council have promoted the clean air concept by utilising district heating at Horsefair Flats and more recently at the Monument Mews housing development, and are currently pursuing it through proposals for a major housing development at Grovetown. Where such schemes can be introduced, then a considerable contribution is made in reducing levels of domestic pollution.

Suspension of Smoke Control Orders

During the winter months of 1970/1971 it became necessary to suspend the smoke control orders. The shortage of solid smokeless fuel became acute and a large number of occupiers in smoke control areas were unable to obtain supplies of fuel. Every effort was made to have supplies diverted into the Borough but to no avail. Meetings between the Council and fuel producers and merchants failed to achieve a solution and approval for suspension of the existing orders was sought and given by the Minister.

At the time of preparing this Report however assurances have been given as to the future availability of solid smokeless fuel, and coupled with increased grants there is now an added incentive to press on with a planned smoke control programme.

Atmospheric Pollution Records

The recording of atmospheric pollution was re-commenced in 1964 after a lapse occasioned by the scepticism of scientific authorities regarding the accuracy of old types of instruments formerly in wide use.

More acceptable is the volumetric type of apparatus for the measurement of suspended impurity of which there are now three in use to sample daily the air in different parts of the town. The accompanying graphs clearly show the wide variation in levels of pollution that occur in the winter and summer months and also the difference in the degree of pollution in a smoke control area as compared with an area that is not subject to control.

The histogram on page 13 compares the degree of pollution, firstly in a smoke control area during winter months, and secondly in the same area during an equivalent part of the year when orders were suspended.

It is interesting also to examine the tabulation showing the number of days in the year upon which readings of smoke and sulphur dioxide exceeded an arbitrary standard of cleanliness of less than 100 micro-grammes per cubic metre per day,

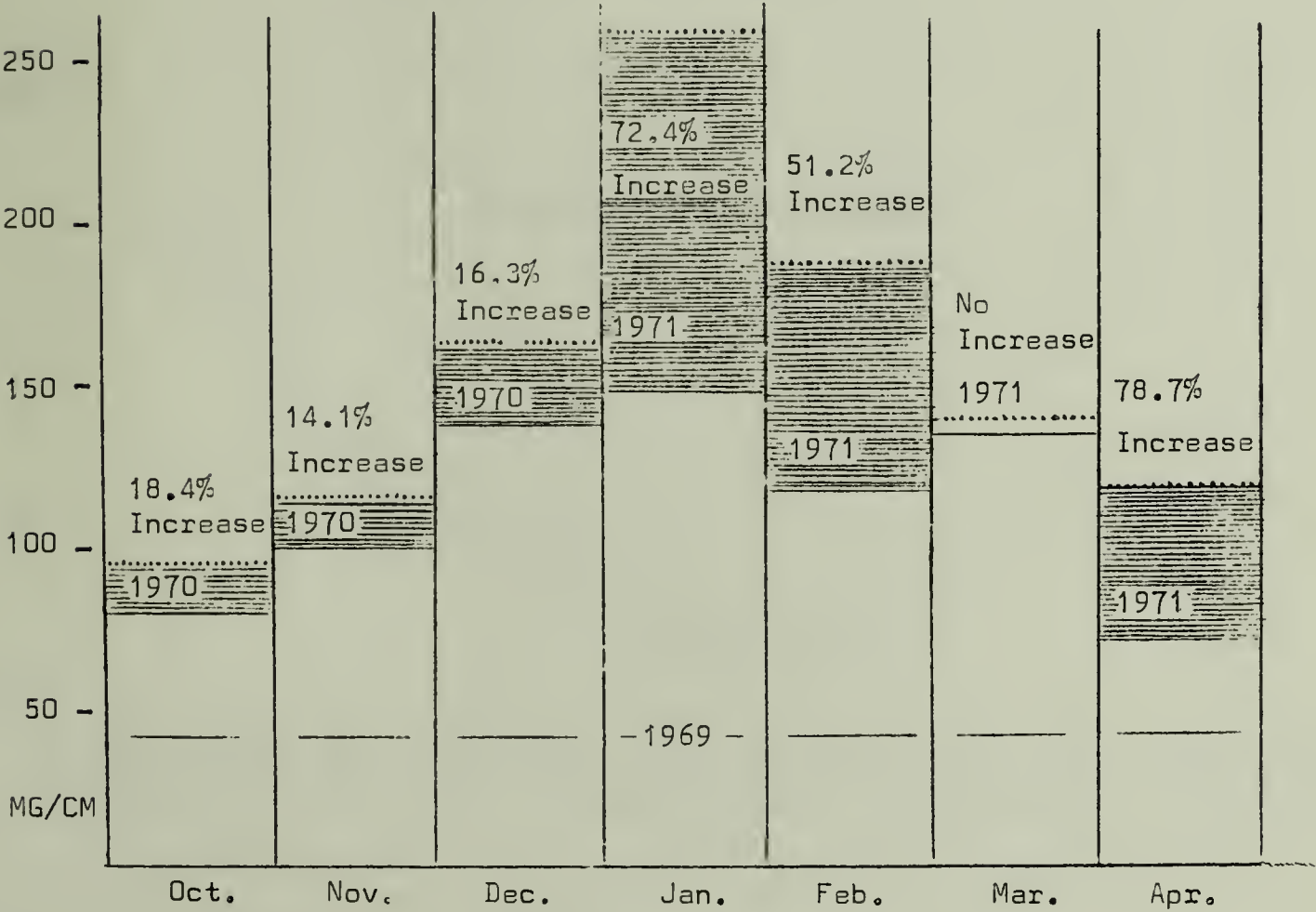
Quite recently an authoritative scientific opinion stated that figures for sulphur dioxide in the range of 60 m/cm per day could be hazardous to anyone prone to respiratory troubles.

Whilst one cannot make authoritative assertions on a small number of instruments, nonetheless records over several years have shown an alarming degree of low level pollution from domestic sources. It is this form of insidious pollution which demands the kind of solution which local authorities are able to supply through smoke control areas.

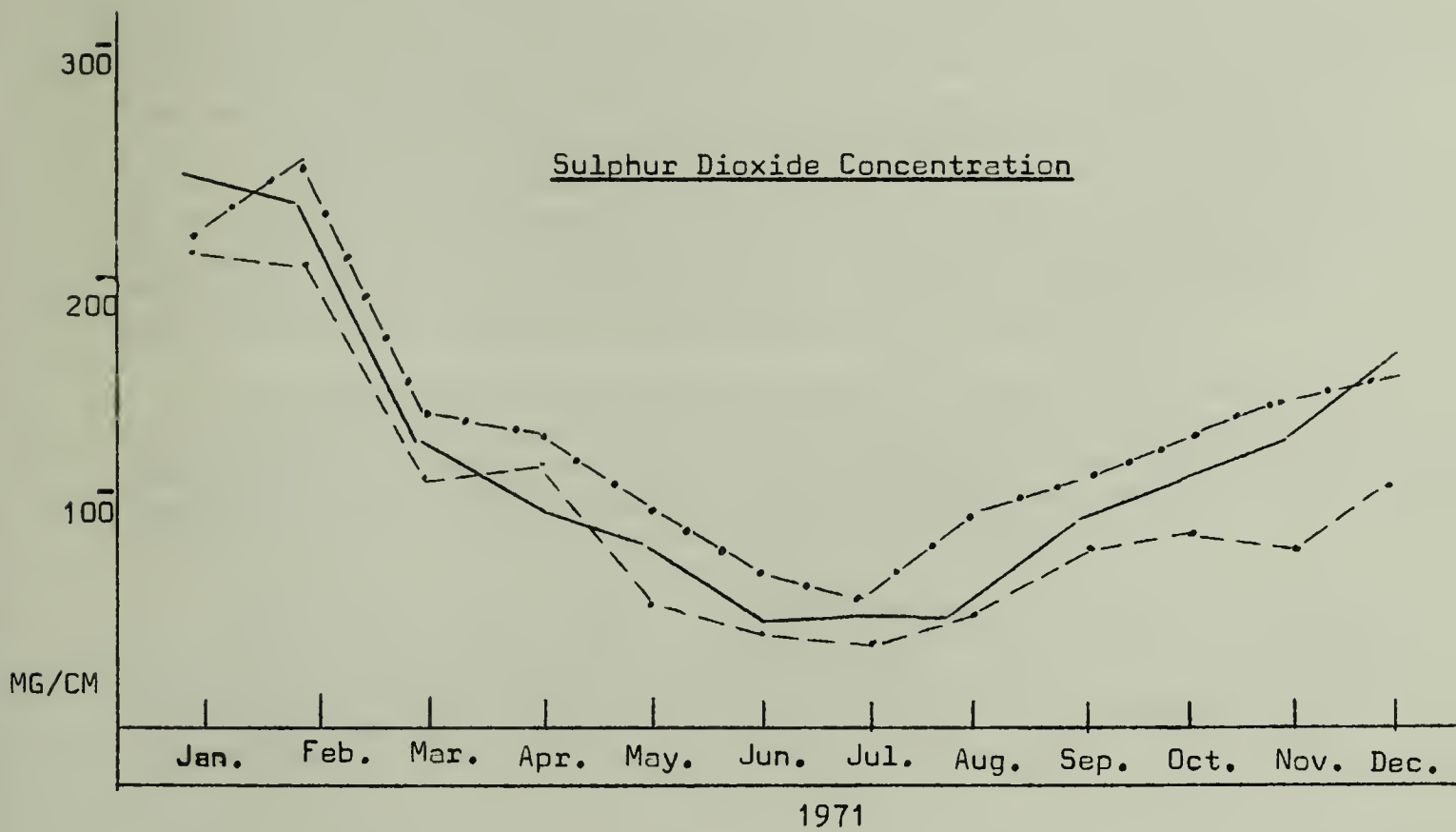
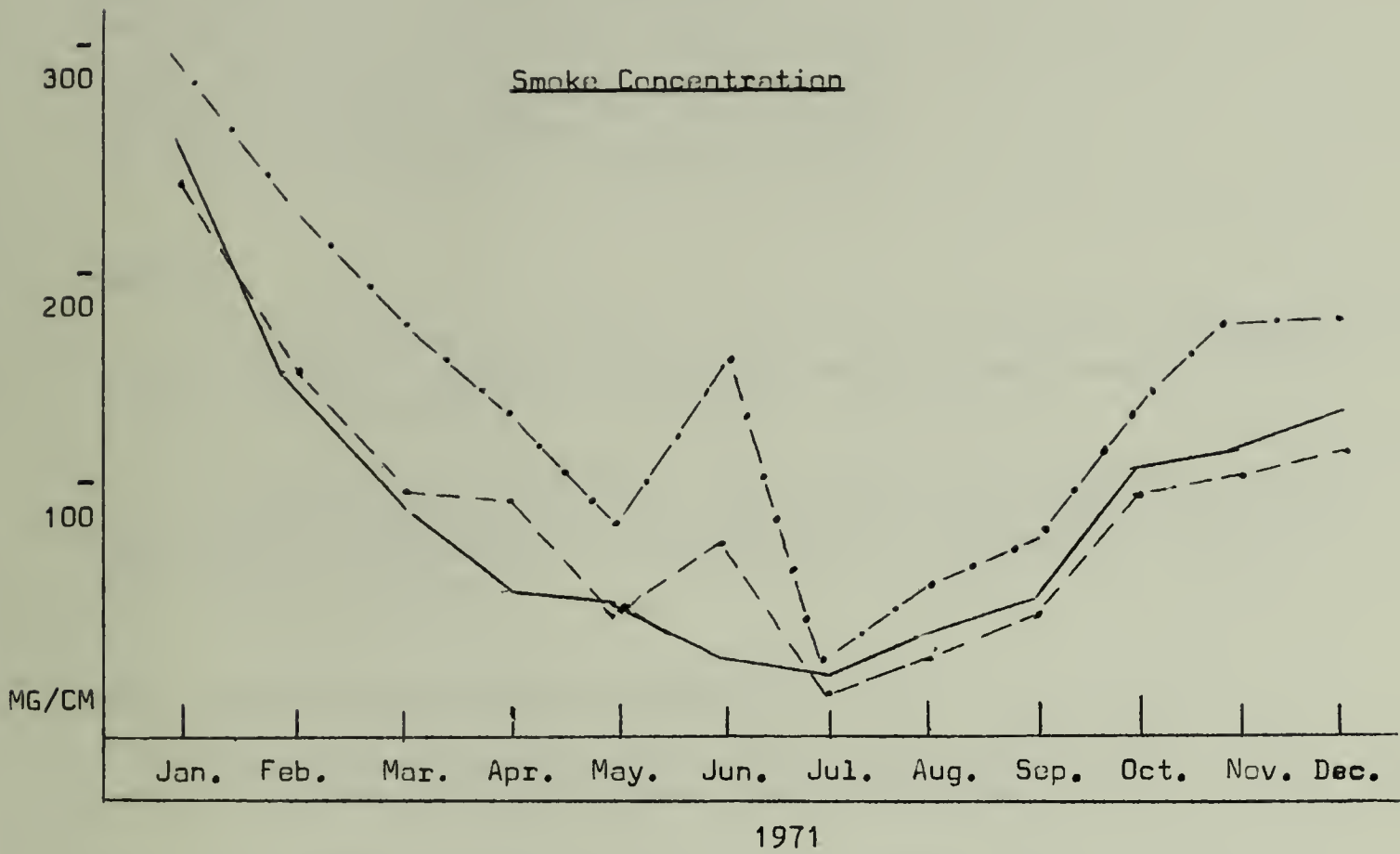
Table 6. Smoke and Sulphur Dioxide Pollution Levels

Location	No. of days readings taken	No. of days			
		Below — 100 M.P.C.M.		Above — 100 M.P.C.M.	
		Smoke	SO ₂	Smoke	SO ₂
Municipal Offices	335	210	169	125	166
Moverley Flatts	327	129	110	198	217
Carleton Park (S.C. Area)	334	195	191	139	143

Incidence of Smoke Pollution following Suspension of the
Smoke Control Orders 1970/1971



— Municipal Offices
 - - - Carleton Parks (Smoke Control Area)
 - . . . Moverley Flatts



Section Three

FOOD CONTROL

Meat Inspection and Diseased Conditions -
Meat Sterilisation Regulations - Sale of Food
in the Open Air - General Food Inspection and
Sampling Techniques - Distribution of Milk and
Ice Cream - Health Education - Food Complaints

General

Food Hygiene may be defined as the 'clean' production, distribution or sale of food. In this context clean means not only freedom from visible dirt but freedom from bacterial contamination.

The Department's inspectorate and in particular the Senior Food and Drugs Act Inspector have been actively engaged during 1971 in promoting the concept of 'clean food' during production processes and subsequent sale within the Borough.

Meat Inspection and Diseased Conditions

There remains only one abattoir operative in the Borough - that occupied by Messrs. Thomas Borthwick and Son Limited.

The throughput is quite considerable and this aspect of an inspector's work is demanding in time and diligence. At the same time meat inspection duties represent the individual inspector's most direct contribution in protecting public health. Not only has he to be well informed in the field of animal pathology, but he must maintain alertness throughout the period of slaughter and subsequent post-mortem analysis. Post-mortem examination of carcasses intended for human consumption is 100% and legislation casts a duty upon local authorities to ensure this is so. This service demands that a greater length of time be spent at the abattoir than hitherto and inspectors are engaged on meat inspection throughout the hours of slaughter. The number of animals slaughtered during the past year was 46,274 and time devoted to meat inspection made substantial inroads on other departmental commitments.

The majority of the people are probably unaware of the local authority meat inspection service and the extensive post-mortem examination that is undertaken on every animal slaughtered for human consumption. Neither is there general awareness of the significant influence that animal diseases can have on the health of the community.

Reference to Table 7 will give some indication of the impact of the meat inspection service. It can be seen that 2,884 of the animals slaughtered were suffering from some condition which if not intercepted would have resulted in meat reaching the public in an undesirable or unfit state.

Table 7. Record of Meat Inspection and Incidence of Disease

Class of Animal	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number killed	7,139	1,379	72	26,334	11,350
Number inspected	7,139	1,379	72	26,334	11,350
All diseases except tuberculosis and cysticerci:					
Whole carcasses condemned	7	7	6	42	21
Carcasses of which some part or organ was condemned	1,336	45	-	465	856
% of animals inspected affected with disease	18.8	3.7	8.3	1.9	7.7
Tuberculosis only:					
Whole carcasses condemned	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	85
% of animals inspected affected with disease	-	-	-	-	0.70
Cysticerci only:					
Carcasses of which some part or organ was condemned	14	-	-	-	-
Carcasses submitted to treat- ment by refrigeration	14	-	-	-	-
Generalised and totally condemned	-	-	-	-	-

Total of all Animals inspected

46,274

During 1971 some 83 whole carcasses together with part carcasses and organs were condemned for a weight of 18 tons, 9 cwt and 14 lbs.

Cysticercus Bovis

Fourteen carcasses were found to be affected with cysticercosis. In all cases cysts were found to be viable and localised in extent and were subsequently treated by refrigeration. Table 8 gives comparative figures of incidence over the past five years. The significance of this parasitic infection is that a viable cyst in undercooked meat can give rise to tapeworm in man following ingestion. Refrigeration for specific periods of time at pre-determined temperatures will effectively destroy viable cysts, hence refrigeration treatment after detection.

Table 8. Incidence of Cysticercus Bovis

Year	No. of cases	% Incidence
1967	4	0.30
1968	15	0.55
1969	17	0.30
1970	28	0.30
1971	14	0.16

The Meat Sterilisation Regulations, 1969

These Regulations require with certain exceptions, that unfit meat should be sterilised before entering the chain of distribution as pet food or for processing for other uses. Where no such sterilisation facilities exist at the abattoir, they may be transported to bone-fide sterilisation plants for treatment, provided the meat is enclosed in lockable, suitably labelled containers or vehicles.

Since these Regulations became operative, experience has shown that there are practical difficulties in securing full compliance. For example the contents of collected bins have to be tabulated and accurately recorded if the notice to be sent with bins is to be of any value. This practice is often difficult in the light of day to day duties at the abattoir, and vigilance of a high order is necessary if risk of cross infection is to be prevented. The occupier of the slaughterhouse cannot always be relied upon to ensure that notices are given to the conveyor of the unfit meat container. We are however fortunate in Pontefract in that the premises dealing with the treatment of this meat is situated nearby and consequently we are able to exercise control over both despatch and receipt.

Food Preparation and Distribution

Food Premises

The Food Hygiene (General) Regulations 1970, became operative during the year under review and consolidated the existing Regulations.

Two of the principal changes, involve the extension of the Regulations to cover premises engaged in the milling or refining of raw foods, and the packing or storing of eggs, fruit or vegetables. Whilst I would not decry the efforts to ensure comprehensive coverage of all food premises I feel that there is a greater need for Regulations to effectively control those matters which we know to be contributory factors in the spread of infection.

A good example is to be found in requirements relating to temperature control. At the moment the only control over the temperature at which foods may be stored or held prior to sale, applies only to those premises from which a catering business is conducted. In such premises food should be held below 10°C. or above 62.7°C. The Regulations afford no control of the temperature at which food products, should be stored in retail premises.

On several occasions investigations revealed that meat products were often stored at ambient room temperatures, and during the summer months these temperatures exceeded 25°C. Such conditions are ideal for the multiplication of pathogenic bacteria.

The majority of food poisoning cases reported each year are found attributable to meat and meat products. Not only are they an ideal medium for bacterial growth but are often subjected to high levels of contamination through repetative handling. The legislators have not seen fit to extend control to cover retail premises. As yet coverage is restricted to catering establishments, and one cannot help but regard this as a major omission in avoiding the risk of food poisoning.

The Department has developed a programme of health education aimed at food handlers in an effort to promote higher standards and wider understanding of matters pertaining to food whether covered by legislation or not.

Somewhat trenchantly it has been said that the annual 'incidence of food poisoning is directly proportional to the number of ignorant people working in the food industry'. Whatever the truth may be of this statement the Department have tackled the problem of food hygiene during the past year on the basis that is a useful empirical premise to commence with. Accordingly health education has been geared to promote wider understanding of all that hygiene implies.

Sale of Food in the Open Air

Hawkers of Food - West Riding County Council (General Powers) Act 1951

As required by the above legislation, a register is kept of persons hawking food in the Borough and hawkers storage premises. Table 9 gives the number of these trades carried on.

Table 9. Food Hawkers according to Trade

Trade	Number
Butcher	10
Butcher and Grocer	3
Greengrocer	14
Greengrocer and Fishmonger	4
Greengrocer and Confectioner	1
Grocer and Confectioner	6
Bread and Confectioner	9
Ice-Cream	20
Fishmonger	6
Hot-dogs	17
Grocer, Butcher and Fishmonger	1
Pies and Peas	1
Raw Vegetables	1
Total	93

Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966

It is now some five years since the introduction of these Regulations, and I can say with some **certainty** that the activities of the Department in this field have enabled us to ensure so far as practicable that a very large percentage of the hawkers within the Borough, maintain satisfactory hygiene standards. A task which is necessary, yet cannot be achieved without expense of time and effort, due to the difficulty in keeping track of mobile shops.

During the year several traders received informal warnings for breach of Regulations and in one case it was necessary to take proceedings against the owner of a 'hot-dog' barrow. He was subsequently found guilty and in the Magistrates Court a fine of £5 was imposed.

General Food Inspection and Sampling Techniques

In addition to the inspection of meat at the abattoir, the Department's food inspector is called upon to inspect meat and other foods at retail and wholesale premises in order to ascertain their fitness for human consumption. Where food is found to be unfit the inspector organises the disposal of the food and issues a certificate of unfitness.

During the period under review the following quantities of food were found to be unfit and were disposed of.

13,944 lbs. Potatoes	118 lbs. Salt
1,680 lbs. Carrots	98 lbs. Sugar
1,003 lbs. Flour	87 lbs. Tinned Soups
843 lbs. Carcase Meat	36 lbs. Tinned Milk
511 lbs. Tinned Vegetables	25 lbs. Jam
398 lbs. Cereals	23 lbs. Dried Fruit
296 lbs. Tinned Fruit	16 lbs. Baby Foods
208 lbs. Tinned Puddings	12 lbs. Tinned Fish
160 lbs. Fresh Fruit	7 lbs. Tinned Fruit Drinks
158 lbs. Tinned Meat	383 lbs. Miscellaneous Foods

Total 8 tons. 18 cwts. and 70 lbs.

also 93 packets of Processed Cheese, 12 Chickens, 2 Ducks, 1 Turkey and 6,738 packets of various frozen foods.

Bacteriological Examination of Food

Throughout the year samples of food products have been taken.

The purpose of such sampling has been twofold; firstly it has enabled the Department to ascertain which if any samples were below standards. On the occasions that positive or otherwise unsatisfactory samples have been found, a full investigation of the circumstances took place.

The second objective and benefit to accrue from sampling is that it has enabled food handlers to see at first hand practical examples of what can happen to food products when handled incorrectly. Where a poor

result has occurred a return visit has been made to the premises to explain the probable reasons for the unsatisfactory result.

Table 10. Articles of Food Submitted to Bacteriological Examination

	No. of Samples	Results	
		Satisfactory	Unsatisfactory
Meat or Meat Products	19	16	3
Fresh Cream Products	9	6	3
Sea Foods	1	1	-
Water Cress	1	1	-

Equipment Swabbing

From time to time the swabbing of equipment and working surfaces in food premises is undertaken and provides information on the effectiveness of cleaning operations in those premises. Any unsatisfactory results are followed up by advice and further tests to ensure compliance with recommendations.

Table 11. Equipment Swabbing

No. of samples	Results		% satisfactory
	Satisfactory	Unsatisfactory	
53	53	-	100

Sewer Swabbing

It has become an established practice in the Department to place in sewers and dykes in the Borough, swabs specially prepared by the Public Health Service Laboratory. These are removed after 48 hours and examined for evidence of pathogenic organisms.

Table 12 shows that of the 18 swabs submitted for examination all but four proved satisfactory. Whilst the Department would like to expand this aspect there are practical difficulties due to the increased demands made upon the Public Health Laboratory Service, but despite this the officers of my Department are grateful for their co-operation.

Table 12. Sewer Swabbing

No. of samples	Results		% satisfactory
	Satisfactory	Unsatisfactory	
18	14	4	78

Milk Supply

Generally, the standard of distribution is satisfactory. Fourteen samples of pasteurised milk ready for sale, were taken during the course of the year for examination for compliance with the standards laid down by the Regulations, and were found to be satisfactory.

No untreated or raw milk producers retail in the Borough and no investigations for the detection of *Brucella Abortus* organisms were undertaken.

A register is kept of all persons carrying on the trade of milk distributor from premises in the Borough, and of all premises in the district which are used as dairies (except dairy farms) which are registered by the Ministry of Agriculture, Fisheries and Food. Table 13 gives particulars of the changes made during the year and of the position at the end of the year.

Table 13. Registration of Dairies and Milk Distributors

Particulars of changes	Dairies	Distributors	
		From Shops	Others
No. on Register at 1st January	3	39	19
No. in respect of which new applications were made	-	9	2
No. removed from register - Trading ceased	-	7	-
No. on register at 31st December	3	41	21

Ice-Cream Manufacture and Sale

As required by Section 16 of the Food and Drugs Act 1955, an ice-cream register is kept of all premises used for the sale, manufacture and storage for sale of ice-cream. Table 14 sets out the position during the year.

Table 14. Registration of Ice-Cream Premises

Particulars of changes	Sale and Storage	Manufacture, sale and storage
No. on register at 1st January	80	1
No. in respect of which new applications were made	3	-
No. of registrations cancelled	12	-
No. of changes in occupation	2	-
No. on register at 31st December	71	1

There is now only one ice-cream manufactory in the Borough and the standard of hygiene during the year was satisfactory.

Nine manufacturers are registered to sell their ice-cream from vehicles in the Borough. Such vehicles must meet the standards laid down by statute and included is the provision of hot water for hand washing and other measures for preventing contamination of ice-cream.

Health Education

As stated in the earlier part of this section it has been the policy of the Department not merely to implement legislation but to attempt to 'widen the horizons' of those employed in the handling of food. During the year the Department has endeavoured to achieve this in several ways.

Firstly during routine inspection, time has been set aside to advise food handlers of their responsibilities. Explanations have been given as to why legal requirements must be met; more often than not this has involved the inspector dealing with principles of basic bacteriology; including vectors of bacterial contamination and subsequent multiplication.

The overall effect of such an approach has been not only to improve standards within the premises, but also to give the food handlers an awareness and sense of responsibility that previously may not have been evident.

Towards the latter part of the year it became possible with the aid of the Further Education Department of the West Riding County Council to establish a series of lectures at the local Further Education Centre. The series enabled those whose appetite had been whetted by conversation during routine inspections, and members of staff of larger food establishments to attend the centre and to study food hygiene in greater depth. The overall effect of such courses must in the long term lift the standard of hygiene in premises within the Borough. To date some 90 food handlers employed in the borough have attended the course, and it is anticipated that more will be attracted to future courses. It is pleasing to report that some twenty-seven candidates elected to sit for The Royal Society of Health Certificate in The Hygiene of Food Retailing and Catering and were subsequently successful.

Throughout the year, the larger food manufacturers and retailers have been encouraged to allow the Department's Senior Food and Drugs Act Inspector to address members of their staff during working hours. A number of the establishments have taken advantage of this offer and several talks and film shows have been held.

Food Complaints

Throughout the year, the Department was involved in the investigation of complaints, particularly where food had been purchased in an unfit state, or was below the quality demanded. Each one was fully investigated and successful legal proceedings undertaken in two cases.

On both occasions the proceedings were in respect of mouldy meat pies, and in the Magistrate's Court fines of £25 and £10 were imposed against the offenders.

In several other instances the Council issued formal warnings having examined the circumstances of each particular case. In other cases no

action was warranted. Without doubt the public are increasingly bringing to the Department complaints regarding articles of food sold over the counter. Whilst all do not justify proceedings they afford an opportunity of background investigation which is usually welcomed by responsible shopkeepers who in my experience have no desire to sell an inferior article.

The following list indicates the range of articles brought for examination:- Meat Pies (4) Fish (3) Cheese (3) Chickens (1) Bread (4) Confectionery (3) Yoghurt (1) Meat (3) Fruit (3) Baked Beans (1) Fruit Juice (1).

Section Four

OCCUPATIONAL HYGIENE - SAFETY AND WELFARE

Factories - Outworkers - Offices - Shops -
Other Workplaces

The Department shares responsibility for hygiene and welfare in places of employment with the Factory Inspectorate. So far as non-industrial premises are concerned recent legislation in the form of the Offices, Shops and Railway Premises Act of 1963 has increased considerably the local authority's responsibilities. Standards have been prescribed by Act and Regulations made thereunder and in the year under review work was primarily concerned with ensuring that all registered premises complied with the requirements of the Act based on advice given by your Inspectors.

Implementation of the Act calls for a special report to be submitted to the appropriate Minister annually on matters of information and work carried out by the Local Authority Inspectorate, in enforcing the Act and its Regulations.

Factories

The term 'factory' as used in the Factory Acts, includes all premises where articles are made, altered or repaired for purposes of gain.

The register of factories, kept by the Council pursuant to section 8(3) of the Act, contains particulars of 94 factories and building sites and Table 15 gives information relating to inspections, notices and defects found and remedied.

Table 15. Factories Records - 1971

	No. on Register	Inspections made	No. of written notices	Defects	
				Found	Remedied
Factories without mechanical power	2	2	-	-	-
Factories with mechanical power	88	72	20	43	32
Building sites	4	4	-	-	-
Totals	94	78	20	43	32

Offices, Shops and Railway Premises Act, 1963

During 1971 detailed general inspections continued as did a considerable number of re-visits to check on works put in hand by employers.

As in previous years plans submitted to the local authority are examined and matters likely to be affected by the Act are made the subject of consultation with architects and developers before they come into useful occupation. This action prevents practical difficulties arising at a later date, and avoids un-necessary resentment.

A considerable amount of time has been devoted to implementation of the Act, and it is pleasing to record that co-operation of employers has so far precluded recourse to statutory enforcement.

(a) Table 16. Registration and General Inspection

	Premises newly registered during they year	Registered premises at end of year	Registered Premises receiving one or more general inspections during the year
Offices	3	87	58
Retail Shops	5	189	153
Wholesale shops, warehouses	-	8	3
Catering establishments open to the public, canteens	2	49	18
Fuel storage depots	-	-	-
Totals	10	333	232

(b)

No. of Premises on register at end of year	No. of premises receiving a general inspection	Total No. of rooms inspected	No. of offences recorded during year	No. of premises found to comply with the Act
333	232	926	239	122

NUMBER OF VISITS OF ALL KINDS BY
INSPECTORS TO REGISTERED PREMISES

382

Table 17. Analysis of recorded particulars of persons employed in registered premises by workplace

Class of workplace	No. of persons employed
Offices	882
Retail Shops	1,074
Wholesale departments, warehouses	80
Catering establishments open to the public	268
Canteens	-
Fuel storage depots	-
Total	2,304
Total Males	955
Total Females	1,349

During the year 15 accidents were reported and duly investigated. Table 18 gives the principal causes of accidents and the relative age and sex distribution.

Table 18. Accident Analysis (Principal Categories)

	Males under 18	Males over 18	Females under 18	Females over 18	All workers
Handling Goods	-	2	2	-	4
Hand Tools	-	1	1	-	2
Falls on or from Ladders or Step-ladders	-	1	-	2	3
Falls from fixed Stairs	-	-	2	1	3
Falls on same level	-	-	1	2	3
Totals	-	4	6	5	15

The nature of injuries sustained was as follows.-

Fractures and dislocations	1
Burns and scalds	2
Bruising	1
Open wounds and surface injury	6
Sprains and strains	5

Section Five

HYGIENE IN PLACES OF PUBLIC RESORT

Swimming Baths - Paddling Pool

Public Swimming Baths - Bacterial Control of Water

The two indoor swimming baths (adult's and children) are filled at the beginning of each season from the public supply, and operate on the continuous filtration system, with sterilisation by chlorination. Samples were taken regularly to ensure the maintenance of satisfactory conditions. Samples were taken for bacteriological examination and the results in Table 19 along with the recommendations of the Ministry of Health, indicate the standards attained during the year. This is despite the continued use of much old equipment and a layout and design which no longer accords to modern practice. It is to the credit of the Baths Manager and his staff that they continue to secure results which are relatively satisfactory.

Table 19. Swimming Baths' Water: Results of Examination

	Standard recommended by Ministry	Results
No. of samples taken	-	8
No. of samples containing coliform organisms in 100 ml. water	None	0
Percentage of number of samples submitted to plate count and containing in 1 ml. water -		
(a) 0 - 10 colonies	Not less than 75%	100%
(b) 11 - 100 colonies	Not more than 25%	-
(c) Over 100 colonies	None	-

Paddling Pool

The paddling pool in the Valley Gardens has proved to be a popular addition to the Gardens. Frequency of water changes, and methods of bacterial and algal control, have been recommended to the Parks' Department and the efficiency of these is checked regularly during the summer months.

Section Six

PUBLIC HEALTH SERVICES

Water Supply - Sewerage, Drainage and Sewage Disposal

Water Supply

On 1st April 1962, the Corporation's Water Undertaking was transferred to the then newly-formed Pontefract, Goole and Selby Water Board. Before the take-over it had been the practice of the Chief Public Health Inspector to sample at the several sources and record and classify the results in this Report. Whilst the Corporation no longer supplies water, it is still very much its concern that the water supplied within the Borough shall be satisfactory in quality and in quantity. Sampling within the Borough has therefore continued, and all waters taken for chemical analysis were reported upon as being of good organic quality.

During the year under review some 182 samples of piped water were submitted for bacteriological examination and all were reported upon as satisfactory.

All dwellinghouses in the Borough are connected to the public supply and have water available within each dwelling; there are none supplied by standpipe.

In the matter of supply, there was no difficulty in maintaining water pressure. Difficulties in recent years have now been resolved with virtual completion of major development schemes prepared by the Water Board.

A typical report on a sample of water is given as follows:

	<u>Parts per million</u>			
Total solids	240
Chloride	27
Sulphate	53
Alkalinity as CaCO ₃	116
Total Hardness	184
Permanent Hardness	68
Temporary Hardness	116
Lead, Copper, Zinc	Nil
Iron	Nil
Manganese	Nil
Free Ammonia	0.04
Albuminoid Ammonia	0.01
Nitrous Nitrogen	Nil
Nitric Nitrogen	8.5
Fluorine	Nil
			pH	7.6

Sewerage, Drainage and Sewage Disposal

The Borough is well sewerred, there being only fifty-three properties not served by public sewer. Nine properties in the Borough are served by private disposal plants, ~~forty-four~~ by cesspools and the remainder representing 99% of the total, are connected to the public sewerage.

PREVENTION AND ABATEMENT OF NUISANCE

Control of Offensive Trades - Noise Abatement -
Animal Hygiene - Moveable Dwellings - Rag Flock
and Other Filling Materials

Control of Offensive Trades

Offensive trades within the meaning of section 107(1)(i) of the Public Health Act 1936, are carried on at two premises in the Borough; the trades concerned being those of bone boiler, fat extractor, fat melter, fellmonger, glue maker and size maker. A further trade permitted to be carried on is the concentration and sterilisation of vegetable and animal waste, declared by the Council to be an offensive trade pursuant to their powers under paragraph (ii)(b) of the sub-section.

These trades provide a necessary and valuable public health service. Without the presence of these trades the disposal of organic waste would be a source of acute embarrassment to the meat trades and a potential disease hazard to the community. Large quantities of waste organic material, some of it already in an advanced state of decay, are brought on to these premises and not only rendered innocuous, but converted into useful commodities which frequently find a way into the export market.

During 1971 as much attention as other departmental commitments allowed was given to the two firms concerned in these trades and some 45 inspections were undertaken. There can be few towns in the country where two offensive trades of similar character are located in such close proximity. The last few years has seen large housing developments take place in the vicinity of the larger of the two factories. Whilst this added factor causes concern to the department to ensure that the premises are free from nuisance, the necessity lies more heavily on management at such premises.

In the planning conscious world we live in it is unlikely that offensive trades would be permitted to become established in residential areas. Where however they are long established one can only endeavour to mitigate the possibility of nuisance arising by dint of inspection.

I understand that research into ways and means of eliminating mal-odours is currently being undertaken by industrial and trade concerns both in this country and America, and one can but hope that the day is not too far hence when offensive trades can be operated in a manner free from nuisance.

Noise Abatement

Somewhat graphically noise has been defined as 'the wrong sound, in the wrong place, at the wrong time'. It produces a subjective reaction that varies amongst individuals or groups of people. This is not wholly dissimilar to the reaction to atmospheric pollution. There are those who react with vigour and concern at the first sign of falling smut, ash or gritty particles, whilst many ignore such conditions or don a mantle of laissez faire towards such problems.

Noise problems are very much a product of technology and the age we live in. The Association of Public Health Inspectors have for some time propounded the concept of noise control areas, and the idea is not as outlandish as it might seem at first sight.

If one examines the trend for traffic free precincts or shopping areas, these could provide a useful starting point. With the co-operation of planning authorities, new trades and industries entering such areas or zones would be required to provide information as to the machinery or equipment to be used, and to provide technical information in advance so as to prevent nuisances arising at a later stage.

Whilst such suggestions are simple and relatively uncomplicated, they clearly underestimate the size of such a task particularly where there are large mixed areas of activity cheek by jowl with dwellinghouses. Be that as it may a start has always to be made, and this Department is already formulating ideas and initiating noise surveys which we hope will be capable of being translated into useful action at a later stage. At least such work is not entirely abstract and has practical long term implications.

Animal Hygiene

Apart from the nuisance potential of animals kept under unsatisfactory conditions, animal diseases may effect, directly or indirectly the public health. The control of conditions, therefore under which animals are kept, whether they be animals on sale in pet shops, or food animals awaiting slaughter, or animals on agricultural holdings, is a matter which must concern the Department.

The Pet Animals Act 1951

This Act provides for the licensing of pet shops by the local authority who, before granting a licence must be satisfied that animals for sale will be kept in accommodation suitable as respects size, temperature, lighting, ventilation and cleanliness. They must be supplied with suitable food and drink and (so far as necessary) visited at suitable intervals; that precautions will be taken to prevent the spread of diseases among animals, and that steps will be taken in the case of fire or other emergency. There are two licensed premises in the Borough, at which satisfactory conditions obtained during the year.

The Animal Boarding Establishments Act 1963

Requirements of the Act are somewhat similar to those contained in the Pet Animals Act. Administration of the Act is made the responsibility of the local authority who must be satisfied that animals will be kept in accommodation suitable as respects size, temperature, lighting, ventilation, cleanliness, be adequately supplied with suitable food and drink and visited and exercised at suitable intervals, and ensure that suitable steps will be taken in case of fire or other emergency.

During the year one licence was issued in respect of premises to be used for the boarding of dogs. Inspections made from time to time have found the business to be well conducted.

Moveable Dwellings

Control of caravans is exercised by the Caravan Site and Control of Development Act of 1960 and the West Riding County Council (General Powers) Act 1951. In the former case control can be exercised by both Planning and Local Authorities in connection with site licensing. The function of the West Riding Act is to prohibit the use in certain cases, sites frequented by itinerant dwellers. One such site is designated in the Borough and since the date of the making of the Order early in 1965 it has been kept free of caravans.

Sporadic problems occurred during the year with itinerant dwellers parking their vehicles on the periphery of the Borough. Informal action subsequently resolved the problems. A total of 32 visits and inspections were made under this heading during the year.

Rag Flock and Other Filling Materials

The Rag Flock and Other Filling Materials Act of 1951 is designed to secure the use of clean filling materials in upholstered articles, and during 1962 Regulations were made under this Act, superseding earlier Regulations, and bringing up-to-date the standards of cleanliness required in relation to the several kinds of filling materials to which the Act applies.

The Act provides for the registration by the local authority of premises upon which filling materials are used in manufacturing articles of upholstery, and one such factory is registered with the Council. Regular inspections are made including the taking of samples for analysis.

Section Eight

PEST CONTROL

Rodent Control Service - Verminous Infestation

Rodent Control Service

The Council is responsible for the administration of the Prevention of Damage by Pests Act 1949 so far as this Act relates to rodent infestation. Routine measures were taken to ensure, so far as practicable, the freedom from infestation of all premises in their own occupation; owners and occupiers of infested properties were required to face up to their responsibilities under the Act and a Rodent Control Service was maintained by the Corporation, available to householders free of charge and to others at a charge which covers the cost of treatment.

The Act places on local authorities a specific duty to inspect their district for infestations, and for much of his time the senior rodent operative was engaged on the discovery of infestations, and the organisation of treatments on 'block control' principles. Table 20 gives statistics relating to known incidence of infestations and to disinfestation measures taken during 1971.

Table 20. Rodent Control Statistics

Properties	Type of Property	
	Non-Agricultural	Agricultural
No. of properties in the district	12,111	37
No. of properties (including adjacent properties) inspected following notifications	741	4
No. infested by - rats	402	4
mice	271	4
No. of properties inspected for rats and/or mice for reasons other than notification	145	6
No. infested by - rats	36	2
mice	26	-

During 1971 treatment of all sewers in the Borough was undertaken. Results indicated that the sewerage system is relatively free from infestation and minor influx of rodents were dealt with by follow-up treatments using 'Warfarin'.

Reports in certain parts of the country show that reserves of rats have become immune to the poison 'Warfarin' probably the most common

method of control exercised at the present time. 'Warfarin' is an anti-coagulant and has been very successful in reducing the rodent population in recent years. There is no evidence in the Borough that rodents have become immune and its use is continued alongside older established poisoning techniques.

Verminous Premises

During the year eight dwellinghouses were treated for vermin. This low rate of incidence illustrates the pattern which has emerged in the post-war years.

In several cases people have produced insects at the Department for identification, but in none was there any public health problems.

ADMINISTRATION AND RECORDS

Tabular Statement of Inspections made and Notices Served

The Public Health Officers Regulations require the recording of inspections made, the preparation of a tabular statement relating to the number and nature of these, to notices served and the results obtained. I have given as accurate a picture as possible in the statement, but when, at one visit, premises are dealt with comprehensively under two or more headings, difficulties in recording can arise.

Table 21. Nature and Number of Inspections made by Public Health Inspectors and Assistant staff during 1971.

<u>Nature of Inspections</u>	<u>Number made</u>
<u>Housing Inspections</u>	
For unfitness, repair or demolition of unfit houses (including surveys under Housing Act 1969 - Sec. 70)	1,008
Improvement with grant aid	630
Area Improvement	683
Following applications for Qualification Certificates	499
Overcrowding and computation of 'permitted numbers'	7
<u>Air Pollution Inspections and Enquiries</u>	
Industrial smoke observations	27
Inspection of boiler plant	12
Investigation of smoke nuisance (Clean Air Act - Sec. 16)	9
Smoke control area enquiries	98
<u>Food Hygiene Inspections and Enquiries</u>	
Visits to Abattoir for meat inspection	831
Number of carcasses examined	46,274
Visits to shops for meat inspection	5
Other foods examination and surrender	118
Investigations into sale of food in the open air	122
Investigations under Milk and Dairies Regulations	7
Visits to food premises -	
Investigations under Food Hygiene Regulations	225
Miscellaneous food enquiries	45
Inspection of food for quality and fitness	94

<u>Nature of Inspections</u>	<u>Number made</u>
<u>Offices, Shops and Railway Premises Act</u>	
All enquiries and inspections	382
<u>Occupational Hygiene Inspections and Enquiries</u>	
For staff welfare in Factories	90
Other Works (building sites)	4
Outworkers premises	-
<u>Agriculture (Safety, Health and Welfare Provisions) Act</u>	
All enquiries and inspections	5
<u>Visits to Places of Public Resort</u>	
Sanitary Accommodation, inspection under s.89 of Public Health Act 1936	11
Inspection of Hairdressing Establishments (West Riding County Council (General Powers) Act 1951)	11
<u>Hygiene and the Public Health Services</u>	
Water Supply	7
Refuse Collection and Disposal, inspections and enquiries	24
Sewerage and Sewage disposal and general drainage inspections (excluding housing defects)	21
Sewerage and general drainage inspections (including housing defects)	435
<u>Investigations connected with the prevention and abatement of nuisances, et cetera</u>	
Offensive Trades	45
Moveable dwellings and sites	32
Noise nuisances	17
Statutory nuisances (including housing defects)	355
Infectious diseases and food poisoning enquiries	32
For verminous conditions	16
<u>Inspections and Enquiries connected with Pest Control</u>	
For rodent infestation (mainly by Rodent Control Staff)	2,356
For other pests	77

<u>Nature of Inspections</u>	<u>Number made</u>
<u>Pet Animals Act 1951</u>	2
<u>Animal Boarding Establishments Act 1963</u>	1
Miscellaneous Enquiries and Visits (including site meetings with architects, builders, etc. and giving of advice to public in their homes and delivery of samples to laboratories, etc.)	378
<u>Sampling</u>	
Water (bacteriological and chemical samples)	209
Swimming Baths water	8
Paddling Pool water	2
Milk	14
Other Foods	34
Ice-Cream	5
Equipment Swabs	53
Sewer Swabs	18
Abattoir Specimens	2
Sampling in connection with infectious diseases	13
<u>Sampling in connection with Atmospheric Pollution</u>	
Volumetric Smoke Filters	996
Sulphur Dioxide Estimation	996

